Fill in this information to identify your case:		
United States Bankruptcy Court for the:		OLERK. US BANKRUPTOY COUR DISTRICT OF CAEROH
District of Oregon		2019 AUG -5 PM 4: 20
19 - 6 2 3 8 4	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	LEBERD HEC'S PART DOOKETED Check if this i amended filin

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
-		About Debtor 1:	About Debtor 2 (Spouse Only In a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Itai	
	identification (for example, your driver's license or	First name	First name
	passport).	Middle name	Middle name
Ì	Bring your picture	Aaronson	
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
	Only the last 4 digits of		
	your Social Security	xxx - xx - 0 1 7 6	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

Debtor	1	

 Itai Aaronson
 Case number (if known)

 First Name
 Middle Name

 Last Name

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer	☐ I have not used any business names or EINs.	☐ I have not used any business names or EļŅs.
Identification Numbers (EIN) you have used in	Aaronson Woodworking	
the last 8 years	Business name	Business name
Include trade names and		
doing business as names	Business name	Business name
	,	
	EIN	EIN
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
	593 Oak Knoll Drive	
	Number Street	Number Street
	97520Jd	
	Ashland OR 9752	City State ZIP Co
	City State ZIP Code	City State ZIP Cod
	Jackson	County
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Coo
Why you are choosing	Check one:	Check one:
this district to file for	Over the last 180 days before filing this petition,	Over the last 180 days before filing this petition,
bankruptcy	I have lived in this district longer than in any other district.	I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

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De	h	Or	1

Itai Aaro	nson		 Case number (if known)	
First Name	Middle Name	i set Name		

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ш		_

Tell the Court About Your Bankruptcy Case

7.	The chapter of the Bankruptcy Code you			r a brief description of each, see <i>No</i> (Form 2010)). Also, go to the top of _l		U.S.C. § 342(b) for Individuals Filing he appropriate box.		
	are choosing to file under	☐ Cha	pter 7					
	under	☑ Chapter 11						
		☐ Cha	pter 12	2				
:		☐ Cha	pter 13	3				
8.	How you will pay the fee	loca your subr	l court f self, yo nitting y	he entire fee when I file my pe for more details about how you ou may pay with cash, cashier's your payment on your behalf, yo printed address.	may pay. Typical check, or money	order. If your attorney is		
-		☑ I ned App	ed to pa	pay the fee in installments. If you for Individuals to Pay The Filing	ou choose this op g Fee in Installma	otion, sign and attach the ents (Official Form 103A).		
		By la less pay	w, a ju than 1t the fee	udge may, but is not required to, 50% of the official poverty line the	waive your fee, nat applies to you his option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the <i>Application to Have the</i> with your petition.		
9.	Have you filed for	☑ No						
	bankruptcy within the last 8 years?	Yes.	District	When	MM / DD / YYYY	Case number		
			District	. When				
			District		MM / DD / YYYY			
			District	When	MM / DD / YYYY	Case number		
10.	. Are any bankruptcy	☑ No						
	cases pending or being filed by a spouse who is	Yes.	Debtor			Relationship to you		
	not filing this case with you, or by a business partner, or by an affiliate?		District		MM / DD / YYYY	Case number, if known		
	unnato.		Debtor			Relationship to you		
			District	When	MM / DD / YYYY	Case number, if known		
11.	Do you rent your residence?	☑ No. ☐ Yes.	_	our landlord obtained an eviction jud	gment against you	?		
				Go to line 12.	Friedland brokens	t Anningt Var. (Earns 1044) and file it as		
				s. Fill out <i>Initial Statement About an</i> rt of this bankruptcy petition.	Eviction Juagmen	t Against You (Form 101A) and file it as		

m -			
De	DI	OГ	7

		☐ Commodity Broker (as defined) ✓ None of the above	ed in 11 U.S.C. § 101(6))				
		Commodity Broker (as define	ed in 11 U.S.C. § 101(6))				
		Commodity Broker (as defined in 11 U.S.C. § 101(6))					
		Stockbroker (as defined in 1					
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
		<u> </u>	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))				
		Check the appropriate box to de	scribe your business:				
iU	tine polition.	City	State	ZIP Code			
sc se	you have more than one ole proprietorship, use a eparate sheet and attach it o this petition.	Ashland	OR	97520			
Ll	LC.	Number Street					
se	eparate legal entity such as corporation, partnership, or	593 Oak Knoll drive					
	usiness you operate as an idividual, and is not a	Name of business, if any					
	sole proprietorship is a	Aaronson Woodworking					
	f any full- or part-time usiness?	Yes. Name and location of business					
	re you a sole proprietor	☐ No. Go to Part 4.					

are you a small business debtor?

> For a definition of small business debtor, see 11 U.S.C. § 101(51D).

any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

■ No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4:

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No						
Yes.	What is the hazard?					
	If improved the attacking in					
	If immediate attention is	needed, wh	y is it needed	d?	 	
	in immediate attention is	needed, wh	y is it needed	J?	 	
	Where is the property?					

ZIP Code

State

City

Debtor	1
--------	---

Itai Aaronson

Fire	

ne Middle Nam

Last Name

Case number (if known)	
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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not	required	to	receive	а	briefing	about
credit co	ounseling	be	cause o	f:		

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

Itai Aaro	nson		Case number (if known)	
Clear Manage	Middle Mamo	t ast Mama		

Part 6: Answer These Ques	stions for Reporting Purposes	s		
16. What kind of debts do you have?	No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or inve	primarily for a personal, famil	y, or household purpose ess debts are debts that	e." you incurred to obtain
	Yes. Go to line 17. 16c. State the type of debts you o	wee that are not consumer dal	hte or hueingee dahte	
	16c. State the type of debts you o	we that are not consumer der	DIS OF DUSTIFIESS GEDIS.	
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution	 ☑ No. I am not filing under Chapter ☐ Yes. I am filing under Chapter administrative expenses ☐ No ☐ Yes 		any exempt property is ailable to distribute to ur	excluded and nsecured creditors?
to unsecured creditors?				
18. How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	50,00	01-50,000 01-100,000 • than 100,000
estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 milli \$100,000,001-\$500 mi	on	0,000,001-\$1 billion 00,000,001-\$10 billion 000,000,001-\$50 billion o than \$50 billion
eo. How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 millio \$50,000,001-\$100 millio \$100,000,001-\$500 mi	on	0,000,001-\$1 billion 00,000,001-\$10 billion 000,000,001-\$50 billion o than \$50 billion
Part 7: Sign Below				
For you	I have examined this petition, and correct. If I have chosen to file under Chap of title 11, United States Code. I under Chapter 7.	oter 7, I am aware that I may p	proceed, if eligible, unde	er Chapter 7, 11,12, or 13
	If no attorney represents me and I this document, I have obtained an	did not pay or agree to pay s d read the notice required by	omeone who is пot an a 11 U.S.C. § 342(b).	attorney to help me fill out
	I request relief in accordance with			
	I understand making a false stater with a bankruptcy case can result 18 U.S.C. §§ 152, 1341, 1519, and	in fines up to \$250,000, or im d 3571.	prisonment for up to 20	perty by fraud in connection years, or both.
	X Control	<u> </u>		
	Signature of Debtor 1		Signature of Debtor 2 Executed on	
	Executed on MM / DD / YY			/YYYY

Debtor	1
DUDIU	- 1

Itai Aaronson

Firel Name

Middle Name

l atl Name

Case number (if known)_____

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?
□ No ☑ Yes
Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?
□ No ☑ Yes
Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?
Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

Signature of Debtor 1

Date

08/05/2019

MM / DD / YYYY

Contact phone

541-292-7125

Cell phone

Email address

Signature of Debtor 2

Date

MM / DD / YYYY

Contact phone

Cell phone

Email address

Email address

Email address

Email address

Fill in this is	nformation to identify y	(OUR CASE)				
	Itai Aaronson	our cuso.				
Debtor 1	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filling	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the: [District of Oregon				
Case number	(If known)					neck if this is ar
	(ii kilowii)				an	nended filing
Official I	Form 106Sum	_				
Summa	ry of Your As	sets and Li	abilities and (ertain Statistical Info	rmatio	n 12/15
				ther, both are equally responsible for a contribution on this form. If you are filing amended		
			and check the box at the		Schedules	anter you me
Part 1: Su	ımmarize Your Asse	ute.				
G.						
					Your asse	ts hat you own
Schedule A	VB: Property (Official Fo	rm 106A/B)			value of the	-
					\$	300,000
1h Conv li	ne 62. Total personal pro	nerty from Schedul	le A/R		\$	17,815
ть. Сору на	ile 02, Total personal pro	perty, none conoca	<i>G</i> 70 <i>G</i>		Ψ	
1c. Copy lit	ne 63, Total of all propert	y on Schedule A/B.			\$	317,815
					l	
Part 2: Su	ımmarize Your Liabi	lities				
					Vanu fiabi	ilitiaa
					Your liabi Amount yo	
			roperty (Official Form 106		•	140,000
2a. Copy th	e total you listed in Colu	mn A, <i>Amount of cla</i>	aim, at the bottom of the I	ast page of Part 1 of Schedule D	\$	170,000
	VF: Creditors Who Have		•		\$	0
3a. Copy th	e total claims from Part	1 (priority unsecured	I claims) from line 6e of 5	chedule E/F	~	
3b. Copy th	e total claims from Part 2	2 (nonpriority unsecu	ured claims) from line 6j o	f Schedule E/F	+ \$	66,000
						206,000
				Your total liabilities	\$	200,000
			_			
Part 3: Su	mmarize Your Incom	ne and Expenses	5			
	Your Income (Official Fo				_	0
Copy your	combined monthly incom	ne from line 12 of Sc	hedule I		\$	
	Your Expenses (Official				_	2,705
Copy your	monthly expenses from I	ine 22c of Schedule	J		\$	

Dobtor	4
Debtor	ı

Itai Aaronson
First Name Middle Name Last Name

Case number (if known)

art 4:	Answer These Questions for Administrative and Statistical Records	.	
Are yo	u filing for bankruptcy under Chapters 7, 11, or 13?		
		orm to the court with your other	r schedules.
What ki	ind of debt do you have?	Handranes, mercania estada de la Maria de Caracteria de Ca	
You fam	ur debts are primarily consumer debts. Consumer debts are those "incurred by an illy, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpo	individual primarily for a personses. 28 U.S.C. § 159.	enal,
		t of the form. Check this box ar	nd submit
From ti Form 1	he Statement of Your Current Monthly Income: Copy your total current monthly in 22A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official	\$0_
Copy th	ne following special categories of claims from Part 4, line 6 of Schedule E/F:		u ga unga pangganana cammamamana a sama a haka a <mark>da ba</mark> bah ka Malifa
		Total claim	
From	Part 4 on Schedule E/F, copy the following:		
9a. Don	nestic support obligations (Copy line 6a.)	\$0	
9b. Tax	es and certain other debts you owe the government. (Copy line 6b.)	\$0	
9c. Clai	ms for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0	
9d. Stud	dent loans. (Copy line 6f.)	\$0	
9e. Obli prio	igations arising out of a separation agreement or divorce that you did not report as rity claims. (Copy line 6g.)	\$0	
9f. Deb	ots to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0	
9g. Tot a	al. Add lines 9a through 9f.	<u>\$</u>	
	Are yo No. Yes What k You fam You fam Copy th From 9a. Dor 9b. Tax 9c. Clai 9d. Stud 9e. Obl prio 9f. Det	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose this form to the court with your other schedules.	Are you filling for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other. Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a persor family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-8g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box are this form to the court with your other schedules. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) * O

Debtor 1	Itai Aaronson		
Debtor I	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court fo	r the: District of Oregon	
Case number			

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an interest In

1 Ye	o. Go to Part 2. es. Where is the property?	?				
1.1.	593 Oak Knoll Driv Street address, if available, o	⁄e	escription	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured classifie amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 300,000	d claims on Schedule D: ns Secured by Property.
	Ashland	OR State	9752 ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
				Who has an interest in the property? Check one.	Bank of America	
	Jackson County			 ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another 	Check if this is co	mmunity property
•	own or have more than or			what is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
1.2.	Street address, if available,	or other de	escription	Condominium or cooperativeManufactured or mobile home	Current value of the entire property?	
1.2.						
1.2.				Land	\$	\$
1.2.	City	State	ZIP Code	☐ Land ☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by

Case 19-62384-tmr11 Doc 1-1 Filed 08/05/19

	Itai Aaronson First Name Middle Name Last Name	Case number (##	known)	
1.3.	Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured clathe amount of any secure- Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D:
	City State ZIP Cod	Other	Describe the nature of interest (such as feethe entireties, or a life	simple, tenancy by
	County	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this its property identification number:	Check if this is co (see instructions) em, such as local	emmunity property
2. Add (you l	the dollar value of the portion you own for have attached for Part 1. Write that number	all of your entries from Part 1, including any entries	s for pages →	\$ 300,000
ou own	own, lease, or have legal or equitable inte that someone else drives. If you lease a veh	rest in any vehicles, whether they are registered or icle, also report it on Schedule G: Executory Contracts	not? Include any vehicles	s
	lo		and Unexpired Leases.	
□ N □ Y 3.1.	lo		Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$6,500	aims or exemptions. Put d claims on <i>Schedule D</i> :

Debtor 1	Itai Aaronsor		Case number (#A	onown)	
	First Name Midd	lle Name Last Name			
	Make:	VW	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put
3,3.		Jetta	Debtor 1 only	the amount of any secure Creditors Who Have Clain	
	Model:	***	Debtor 2 only	and the second	
	Year:	75,000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:	73,000	At least one of the debtors and another	Sittle property.	,
	Other information:			s 3,100	\$ 3,100
	inoperable		☐ Check if this is community property (see instructions)	Ψ	7
3.4.	Make:	BMW	Who has an interest in the property? Check one.	Do not deduct secured cla	
0,4,	Model:	545	☐ Debtor 1 only	the amount of any secure Creditors Who Have Clain	
		2004	Debtor 2 only	······	the second of the second
	Year:	120,000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Approximate mileage:		At least one of the debtors and another		•
	Other information: inoperable		☐ Check if this is community property (see instructions)	\$2,700	\$2,700
	<i>nples:</i> Boats, trailers, m lo		er recreational vehicles, other vehicles, and acces aft, fishing vessels, snowmobiles, motorcycle accesso		
-	es				
4.1.	Make:		Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	
	Model:		Debtor 1 only	Creditors Who Have Clair	
	Year:		Debtor 2 only		
	Other information:	•	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Other information.		At least one of the deptors and another	entite property:	portion you own:
			☐ Check if this is community property (see instructions)	\$	\$
		11.0.007	,		
If you	own or have more than	n one, list here:			
4.2.	Make:		Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	ims or exemptions. Put
	Model:		Debtor 1 only	Creditors Who Have Clair	ns Secured by Property.
	Year:		Debtor 2 only	Current value of the	Current value of the
		•	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:		At least one of the debtors and another		

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

instructions)

14,600

☐ Check if this is community property (see

n_{α}	htar	4
	חמומי	

Itai Aaronson	
---------------	--

Circt Name	Middle Nac

Case number (if known)	
------------------------	--

or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No ☑ Yes. Describe	Do you own or have any le	egal or equitable interest in any of the following items?	Current value of the portion you own?	
Examples: Major appliances, furniture, linens, china, kitchenware No Yes, Describe			Do not deduct secured o or exemptions.	laims
Examples: Major appliances, furniture, linens, china, kitchenware No No Zi Yes. Describe	6. Household goods and t	furnishings		
☑ Yes. Describe	-			
7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No No Yes, Describe		It'll be the second bank about		250
7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment: computers, printers, scanners; mustic collections; electronic devices including cell phones, cameras, media players, games No Yes. Describe	Yes. Describe		<u> </u>	
Collections; electronic devices including cell phones, cameras, media players, games ☑ Yes. Describe				
Yes. Describe	collections; e	lectronic devices including cell phones, cameras, media players, games		
8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles 2 No				100
a. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; starm, coin, or baseball card collections; other collections, memorabilia, collectibles ② No □ Yes. Describe	Yes. Describe			
stamp, coin, or baseball card collections; other collections, memorabilia, collections No Yes. Describe				
Yes. Describe S	Examples: Antiques and	figurines; paintings, prints, or other artwork; books, pictures, or other art objects;		
9. Equipment for sports and hobbles Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; cances and kayaks, carpentry tools; musical instruments 2 No				
9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	Yes. Describe		\$	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No	Equipment for enerts 3		sametan ef	
and kayaks; carpentry tools; musical instruments No	Examples: Sports, photo	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes		
Yes. Describe	and kayaks;	carpentry tools; musical instruments		
10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment INO Yes. Describe				
10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment I No Yes. Describe	ļ.			
☑ No Yes. Describe				
☐ Yes. Describe	· · · · · · · · · · · · · · · · · · ·			
11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No ✓ Yes. Describe	1		•	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe	Yes. Describe		Ψ	
No ✓ Yes. Describe Simple work and casual clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ✓ No ✓ Yes. Describe	, ,			
Yes. Describe Simple work and casual clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe			•	
12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ✓ No ✓ Yes. Describe			s	75
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe	Tes. Describe	·		
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe	to laweler			
✓ No Yes. Describe	Examples: Everyday jew	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
Yes. Describe	<u>-</u> .			
13. Non-farm animals Examples: Dogs, cats, birds, horses No ✓ Yes. Describe			\$	
Examples: Dogs, cats, birds, horses No Yes. Describe				
No ✓ Yes. Describe		irde horens		
Yes. Describe				
14. Any other personal and household items you did not already list, including any health aids you did not list ☑ No ☑ Yes. Give specific \$	☐ No ☐ Yes Describe	2 rescued kittens	\$	0
☑ No ☑ Yes. Give specific \$				
☐ Yes. Give specific \$	14. Any other personal and	I household items you did not already list, including any health aids you did not list		
TOTAL CONTROL OF THE PROPERTY			\$	
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached				850

for Part 3. Write that number here

Debtor	3

Itai Aaronson

251	Mar	n

Case number (if known)

Part 4: Describe Your Financial Assets

Do you own or have any l	legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claim or exemptions.
16. Cash <i>Examples:</i> Money you h	nave in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file	your petition	
☐ No ☑ Yes			65 ash:	\$65_
and other si	avings, or other financial accou milar institutions. If you have m	nts; certificates of deposit; shares in credit unions, but ultiple accounts with the same institution, list each.	rokerage houses,	
☐ No ☑ Yes		Institution name:		
	17.1. Checking account:	Chase		\$2,300
	17.2, Checking account:			\$
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			\$
				•
	17.6. Other financial account:			Ψ
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
18. Bonds, mutual funds, Examples: Bond funds, No Yes	or publicly traded stocks investment accounts with brok Institution or issuer name:	erage firms, money market accounts		
				\$
				\$
				\$
19. Non-publicly traded st an LLC, partnership, a	tock and interests in incorpo and joint venture	rated and unincorporated businesses, including	an interest in	
□ No	Name of entity:		of ownership:	_
Yes. Give specific information about	Autobloom, LLC		11 %	\$0
them)%%)% %	\$
			%	\$

De	btor	1

otor 1 Ital Aarons	Middle Name Last Name	
Lilet Ideille	III/dute reason	
overnment and corpo	rate bonds and other negotiable and non-negotiable instruments	
legotiable instruments i	nclude personal checks, cashiers' checks, promissory notes, and money orders.	
lon-negotiable instrume	ints are those you cannot transfer to someone by signing or delivering them.	
Ž No	•	
Yes. Give specific	Issuer name:	
information about		\$
them		\$
		\$
Retirement or pension Ex <i>amples:</i> Interests in IF	RA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
Ž No		
Yes. List each		
account separately.	Type of account: Institution name:	
	401(k) or similar plan:	\$
	Pension plan:	\$
		\$
	IRA:	Φ
	Retirement account:	\$
	Keogh:	\$
	Additional account:	\$
	Additional account:	\$
	Additional account:	Ψ
security deposits and property of all unused Examples: Agreements of all unused Examples: Agreements of others	deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications	
☑ No		
☐ Yes	Institution name or individual:	
	Electric:	\$
	Gas:	\$
	Heating oil:	\$
	Security deposit on rental unit:	\$
	Prepaid rent:	\$
		\$
	Telephone:	
	Water:	\$
	Rented furniture:	\$
	Other:	\$
Annuities (A contract fo	r a periodic payment of money to you, either for life or for a number of years)	
☑ No		
☐ Yes	Issuer name and description:	
		\$
		\$
		\$

Official Form 106A/B

otor 1	Itai Aaron	Middle Naces	3	Name			ase number (ir kin	JIIII		
	First Name	Middle Name	Last	Maus						
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	in an education. §§ 530(b)(1),				M ABEE progra	ini, or arraor a q	44			
1 No										
Yes .		········ Institu	ition name	and descrip	tion. Separately	file the records	of any interest	s.11 U.S.C. § 52	1(c):	
									e	
		<u> </u>							_ \$	
									_ \$	
			<u> </u>						– \$ <u> </u>	
rusts, ed xercisal	quitable or fut ble for your b	ture interest: enefit	s in prope	rty (other th	nan anything lis	ited in line 1), a	na rights or p	owers		
1 No										
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	nation about th	em							\$	
		Landers	~~~~~							
atents,	copyrights, tr	ademarks, ti	rade secre	ets, and other	er intellectual p n royalties and lic	roperty censing agreems	ents			
	s. internet dom	am names, w	ensues, pi	OCCERTS HOW	. royanios and m	co.ionig agreein	-			
2 No		f			V	**************************************		Park of Company and Company Company of the Company		
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	Give specific nation about th	em							\$	
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inform Licenses Examples V No Yes. (inform	nation about th s, franchises, s: Building per Give specific	and other ge mits, exclusive	neral inta	ngibles			nses, professio	onal licenses	\$Cur	rrent value of ti tion you own? not deduct secured
inform icenses Examples No Yes. (inform	nation about th s, franchises, s: Building perr Give specific nation about th	and other ge mits, exclusive	neral inta	ngibles			nses, professio	onal licenses	\$Cur	tion you own?
inform incenses Examples No Yes. (inform ey or pr	nation about th s, franchises, s: Building perr Give specific nation about th	and other ge mits, exclusive em	neral inta	ngibles			nses, professio	onal licenses	\$Cur	tion you own? not deduct secured
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inform icenses xamples 1 No 1 Yes. (inform ey or pr ax refun 1 No 1 Yes. (nation about the s, franchises, s: Building perromation about the roperty owed ands owed to y Give specific ir	and other ge nits, exclusive em to you?	neral inta	ngibles				onal licenses	\$Cur por Do r clair	tion you own? not deduct secured ms or exemptions.
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inform icenses xamples 1 No 1 Yes. (inform ey or pr 1 No 1 Yes. (inform 1 No 2 Yes. (inform 2 No 3 Yes. (inform 3 No 4 Yes. (inform 4 No 5 Yes. (inform 6 No	nation about the s, franchises, s: Building perromation about the roperty owed ands owed to y. Give specific in about them, income and the tax years aupport s: Past due or	and other ge mits, exclusive em to you? ou formation cluding wheth ed the returns ars	neral inta e licenses, mony, spou	ngibles cooperative	association hole	dings, liquor lice	F	Federal: State: Local:	SSSSSSS	tion you own? not deduct secured ms or exemptions.
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inform incenses Examples No Yes. (inform rey or pr ax refun No Yes. (inform rey or pr	nation about the s, franchises, s: Building perromation about the roperty owed ands owed to y. Give specific in about them, income and the tax years aupport s: Past due or	and other ge mits, exclusive em to you? ou formation cluding wheth ed the returns ars	neral inta e licenses, mony, spou	ngibles cooperative	association hole	dings, liquor lice	orce settlemen	Federal: State: Local: ot, property settle dimony: faintenance:	\$\$_ment	tion you own? not deduct secured ms or exemptions.
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page 7

☐ Yes. Give specific information.....

☑ No

Debtor 1	Itai Aaronson		Case number (if known)	
	First Name Middle Name	Last Name		
31. Intere	sts in insurance policies ples: Health, disability, or life insura	nce; health savings account (F	HSA); credit, homeowner's, or renter's insurance	
Ø No				
	es. Name the insurance company	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its value.			\$
				\$
				\$
00 Amu 1	nterest in property that is due yo	u from someone who has die	ed	
If you prope	are the beneficiary of a living trust, rty because someone has died.	expect proceeds from a life ins	surance policy, or are currently entitled to receive	
☑ No		market for any more than the professional and market more than 1 kg by the section of the contract of the first features.		····· }
□ Ye	es. Give specific information			\$
	t think we then whathou		it or made a demand for payment	
33. Ctaim Exam	is against third parties, whether t ples: Accidents, employment dispu	ies, insurance claims, or rights	to sue	
☑ No				~7
□ Y€	es. Describe each claim	•		\$
	e to the standalated also		g counterclaims of the debtor and rights	
34. Other to set	contingent and unliquidated cla coff claims	mis of every nature, moruum	g counterolatine of the decision and vigini	
☑ N				~
☐ Ye	es. Describe each claim			
		Sugara con con successive program con con a finish program program on a successive program program on a con-		
	t land to the second of the second of the second	du liat		
-	inancial assets you did not alread	the Her		···•
2 No □ Ye	o es. Give specific information			\$
36 Add f	he dollar value of all of your entr	ies from Part 4, including an	y entries for pages you have attached	2,365
for Pa	art 4. Write that number here		→	\$
	_			
Part 5:	Describe Any Business	-Related Property You	l Own or Have an Interest In. List any r	eal estate in Part 1.
37. Do vo	ou own or have any legal or equit	able interest in any business	s-related property?	
	o. Go to Part 6.			
□ Ye	es. Go to line 38.			
				Current value of the portion you own?
				Do not deduct secured claims or exemptions.
38. Acco	unts receivable or commissions	you already earned		
□ N				- -)
□ Y ₂	es. Describe	1		\$
39. Office	e equipment, furnishings, and su	pplies are, modems, printers, copiers, fax	machines, rugs, telephones, desks, chairs, electronic devices	
Exam				~~ }

page 8

☐ Yes. Describe.....

Debtor 1 Itai Aaron	Niddle Name	Łast Namė		Case number (#kn	own)	
40. Machinery, fixtures, e	auinment suni	nlies vou use in t	husiness and tools	of your trade		
□ No	Julpinont, Supp	mes you ase in a	basiness, and teele	or your trade		
Yes. Describe				to the same as the contraction and a fundamental format in the Property of Association (Included Plans		
- res. bestine						\$
41. Inventory						-
Yes. Describe						\$
L		a comprehensive and process and process and an arrangement of the comprehensive and the	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
42.Interests in partnershi	ps or joint ven	tures				
□ No						
Yes. Describe	Name of entity:				% of ownership:	
					%	\$
					%	\$
					%	\$
40 Customor listo mailin	a liata ar atha	r compilations				
43. Customer lists, mailing	g lists, or other	compliations				
Yes. Do your lists	include person	ally identifiable in	information (as defir	ned in 11 U.S.C. § 101(41A))	?	
☐ No			en andre de la companya de la compa	g voga se gang garananan mananan manan manan manan na manan a mili da da manah madi kadi kidi kadin da kebabak		
Yes. Desci	ibe					\$
44. Any business-related	property you d	id not already list	st			
☐ No ☐ Yes. Give specific						
information						\$
				· · · · · · · · · · · · · · · · · · ·		\$
				LIMAN.		\$
				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$
						\$
						\$
45 Add the defler value o	f all of your on	trice from Part 5	including any entri	es for pages you have attac	ched	0
						\$
		Commercial Fis st in farmland, lis		operty You Own or Have	e an Interest Ir	
		4-1-1-1-1-1-1				
46. Do you own or have an ✓ No. Go to Part 7.	ıy tegal or equi	table interest in a	any tarm- or comme	ercial fishing-related prope	ity f	
Yes. Go to line 47.						
						Current value of the
						portion you own?
						Do not deduct secured claims or exemptions.
47. Farm animals						
Examples: Livestock, po	ouitry, farm-raise	a tish				
☑ No ☐ Yes				openimina suoma na santa da delenta na santa malandona santa del malando del malando del malando del malando d		_

Debtor 1 Itai Aaro	onson				Case number (# known)			
First Name	Middle Name	Last Name			Cado nambor primaini			
48. Crops—either growi	ng or harvested							
☑ No	!	STATE OF THE STATE		And the second s		en montre d'announce de la décembre de la descrip	"]	
Yes. Give specific information		Million (M. John C. M. John C. J. William Bala J. J. Johnson W. A. W.				galacters of the language and a language the spice of the language and the	\$	
49. Farm and fishing equ	uipment, implemen	nts, machinery, fixture	s, and tools	of trade				
☑ No □ Yes				erakan managan ang ang ang ang ang ang ang ang a				
							\$	
50. Farm and fishing sup	plies, chemicals, a	and feed						
☑ No ☐ Yes							~]	
							\$	4400
51. Any farm- and comm ☑ No								
Yes. Give specific information							s	
52. Add the dollar value		es from Part 6 includi						0
					s you have attached	→	\$	
53. Do you have other present to be a second to be			ist?				\$ \$ \$	
4. Add the dollar value o	of all of your entrie	es from Part 7. Write th	hat number l	here		→	\$	0_
art 8: List the T	otals of Each	Part of this Form						
5. Part 1: Total real esta	te. line 2					>	\$	300,000
6. Part 2: Total vehicles			\$	14,600	_			
7.Part 3: Total personal		ems, line 15	\$	850	•			
8. Part 4: Total financial			\$	2,365	-			
9. Part 5: Total business	-related property,	line 45	\$	0	-			
D. Part 6: Total farm- and	d fishing-related p	roperty, line 52	\$	0				
1. Part 7: Total other pro	perty not listed, li	ne 54	+ \$	0				
2. Total personal proper	ty. Add lines 56 thro	ough 61	\$	17,815	Copy personal property	total 👈	+ \$	17,815
3. Total of all property o	n Schedule A/B. A	dd line 55 + line 62		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$	317,815
							I	

Fill in th	is informatio	n to identify yo	ur case:					
Debtor 1	Itai Aa	ıronson]		
Debtor 2	First Name		Middle Name	Last Name				
	filing) First Name		Middle Name	Last Name				
United St	ates Bankruptcy	Court for the: Dis	trict of Orego	n			[77]	
Case nun (If known)							Check if thi amended fi	
						_		
Officia	al Form	106C						
Sch	edule	C: The	Prop	erty You	Claim	as Exemp	t 04	4/19
Using the space is n	property you I eeded, fill out	isted on Schedu	<i>lle A/B: Prope</i> is page as m	erty (Official Form 10	6A/B) as your s	ource, list the property that	supplying correct information. you claim as exempt. If more of any additional pages, write	
specific d of any ap retiremen limits the would be	lollar amount plicable statu it funds—may exemption to limited to the	as exempt. Alt story limit. Som y be unlimited i o a particular de applicable sta	ernatively, y e exemption n dollar amo ollar amount tutory amou	rou may claim the forms—such as those format. However, if you and the value of the cont.	ıll fair market v or health aids, u claim an exe	value of the property bein rights to receive certain emption of 100% of fair ma	ne way of doing so is to state g exempted up to the amoun benefits, and tax-exempt arket value under a law that amount, your exemption	a t
Part 1:	Identify t	he Property	You Claim	as Exempt				
□ Y	ou are claimir	g state and fed	eral nonbank	Check one only, even ruptcy exemptions. 1 S.C. § 522(b)(2)				
2. For a	ny property y	ou list on Scho	edule A/B th	at you claim as exe	mpt, fill in the	information below.		
Brie Sch	ef description edule A/B that	of the property a lists this prope	and line on erty	Current value of the portion you own	Amount of	the exemption you claim	Specific laws that allow exer	mption
				Copy the value from Schedule A/B	Check only	one box for each exemption.		
Brief		lome line 1.1		\$ 300,000	_ 2 \$ 170),350		
Line	ription: — from edule A/B:					of fair market value, up to plicable statutory limit		
Brief	ription:	Oriveable car (3.1	\$ 6,500	_ ☑ \$_6,50	00		
Line	from edule A/B:					of fair market value, up to plicable statutory limit		
Brief	ription:	Household line	15	\$ <u>850</u>	\$ <u></u> 850)		
Line	from edule A/B:					of fair market value, up to plicable statutory limit		<u>-</u>
		_ b	vometice ce	mara than \$470 251	19			
3. Are y (Sub	you claiming ject to adjustn	a nomestead e lent on 4/01/22	and every 3 y	more than \$170,350 rears after that for ca	, ses filed on or a	after the date of adjustment)	
	lo							
_	′es. Did you a ☑ No	cquire the prope	rty covered b	y tne exemption with	ıın ı,∠ıb days b	pefore you filed this case?		
_	Yes							

Itai Aaronsor	Ital	Aa	ron	ISOI
---------------	------	----	-----	------

First Name

Middle Name

Last Nan

Case number (if known)		
------------------------	--	--

Part 2:

Additional Page

Brief description	on of the property and line /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Bank account line 17	\$2,300	\$\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Inoperable car 3.2	\$2,300	3,100	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Inoperable car 3.3	\$3,100	3,100	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Inoperable car 3.4	\$2,700	3 \$ \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	NV 11-	\$	*	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:	-1-1-T		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	· .	\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ 100% of fair market value, up to	
Line from Schedule A/B:	en-		any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	☐ \$ ☐ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	□ \$ □ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	

page 2 of

Fill in this in	nformation to identify yo	our case:						
Debtor 1	Itai aaronson							
	First Name	Middle Nam	e	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Nam	В	Last Name				
United States	Bankruptcy Court for the: Di	istrict of C)regon					
Case number				,			☐ Check	if this is an
(if known)							amend	ed filing
	Form 106D							
Sched	lule D: Cred	itors	Who H	lave Cla	ims Secure	ed by Prop	erty	12/15
information additional p	olete and accurate as po . If more space is neede lages, write your name a reditors have claims see heck this box and submit fill in all of the information	ed, copy tand case cured by this form	number (if kr	i Page, illi it odi iown). /?	t, mainser the entrees, t		,	t any
Part 1: L	ist All Secured Claim	15		· · · · · · · · · · · · · · · · · · ·		Column A	Column B	Column C
£	ecured claims. If a credite claim. If more than one cr as possible, list the claim:	roditor ha	s a narticiliar c	laim, list the our	er Geullois III Fail 2.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
0.4	of America			property that sec		\$140,000	\$300,000	.\$
Creditor's N	orth Tryon Street		Home					
Number	Street							
			As of the date		im is: Check all that apply.			
Charle	otte, NC 2	2825	Unliquidate					
City		Code	☐ Disputed					
Who owes	the debt? Check one.			. Check all that ap	· ·			
Debtor	· ·		An agreem car loan)	ent you made (suc	ch as mortgage or secured			
Debtor:	•			en (such as tax lier	n, mechanic's lien)			
	1 and Debtor 2 only one of the debtors and anoth	her	☐ Judgment!	lien from a lawsuit				
			Other (incl	uding a right to offs	set)	_		
	if this claim relates to a unity debt							
Date debt	was incurred 2009		CONTRACTOR OF THE PROPERTY OF	of account numb	THE PARTY OF THE P			<u>e</u>
2.2			Describe the	property that se	cures the claim:	\$. \$	_ <u>a</u>
Creditor's N	Name							
Number	Street							
					aim is: Check all that apply			
			Contingen					
City	State Zil	P Code	Unliquidate Disputed	30				
,	the debt? Check one.		·	Check all that ap	pply.			
					ch as mortgage or secured			
☐ Debtor☐ Debtor	=		car loan)					
	1 and Debtor 2 only				n, mechanic's lien)			
	t one of the debtors and anot	ther		lien from a lawsuit				
Chark	if this claim relates to a		Other (incl	uding a right to off	set)			
	unity debt				h			
Date debt	was incurred		Last 4 digits	of account num	Der_	menggan katan tanggan Kalangan Kanagan Anggan Sa	endo-camatantelamento tremanecamente este	enegenorio di proposite di veta di propisio di C

Add the dollar value of your entries in Column A on this page. Write that number here: \$____16 Case 19-62384-tmr11 Doc 1-1 Filed 08/05/19

140,000

Debt	or	1
LICUI	OI.	1

Itai

Itai aaron	son		Case number (if known)
First Name	Middle Name	Last Name	

Additional Page Part 1: After listing any entries on this p by 2.4, and so forth.	age, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name				
N				
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZtP Code	☐ Unliquidated☐ Disputed			
AND A STATE OF THE	·			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Objects if this plains valeton to a	Other (including a right to offset)			
Check if this claim relates to a community debt	•			
Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		-		
Number Street				
Helines Officer	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
	☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
At least one of the deplots and another	Other (including a right to offset)	_		
 Check if this claim relates to a community debt 				
Date debt was incurred	Last 4 digits of account number			g og karring i artikum ett græni karring i Santanant er samting i Santan
The first state of the first state of the st	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		1		
Number Street]		
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured	•		
Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Debtor 2 only	Judgment lien from a lawsuit			
At least one of the debtors and another	Other (including a right to offset)	_		
☐ Check if this claim relates to a community debt	, <u>-</u>			
Date debt was incurred	Last 4 digits of account number		٦	
I ·	s in Column A on this page. Write that number here:	\$		
If this is the last page of your form Write that number here: Cas	, add the dollar value totals from all pages. e 19-62384-tmr11 Doc 1-1 Filed (8/05/19		

Debtor	1

Part 2:

+	AAKABCAB
11711	aaronson

First Name

Middle Name

Last Nam

List Others to Be Notified for a Debt That You Already Listed

Case number	(if known)	 	

	-	do not fill out or submit		On which line in Part 1 did you enter the creditor?
ame				Last 4 digits of account number
ımber	Street			-
ity		State	ZIP Code	
and street and a sign of	the contract of the first one was the same by a second or second or second or second or second or second or se	a de la composição e formar e sendo de sendo de mendera de la constitución de la constitu	en engan en egyggenere _e n en en en en en egyggggggen en e	On which line in Part 1 did you enter the creditor?
ame				Last 4 digits of account number
umber	Street			
ity		State	ZIP Code	
ere e e e e e e e e e e e e e e e e e e	e energial annua sistem y mar annua a sa annua fa a chuirg mar ainneach an faigh air an ainm air ann	er men i Servici de Selectorio en el mentro destada un discondidado en entre e en e	al en la companya de	On which line in Part 1 did you enter the creditor?
ame	,			Last 4 digits of account number
umber	Street			_
ity		State	ZIP Code	
y end order towns of a rest	e vittige, se attiti te refer ste de este este est est est est est est est	gen engigen kan geografi saman manangan sengan pangan pangan sengan sengan sa da Pangan	egiskoreti kiritata a periodi aratika aratika aratika periodi aratika aratika aratika aratika aratika aratika a	On which line in Part 1 did you enter the creditor?
ame	,			Last 4 digits of account number
lumber	Street			- -
ity		State	ZIP Code	
- Anna Anna Anna Anna Anna Anna Anna Ann	en en 1960 de la compaña d			On which line in Part 1 did you enter the creditor?
lame				Last 4 digits of account number
lumber	Street			
City		State	ZiP Code	_
eneg	ত ব্যাহরকার ১৯৮১ করে আরম্বারকার স্থানের সংক্রম করিবলৈ করিবলৈ সংক্রম হ	k militar kanan sayan madan ka mada ka	erick dan state of dished. Some was a recommender of the level of the day and and south sections of	On which line in Part 1 did you enter the creditor?
lame				Last 4 digits of account number
lumber	Street			_

Fill in this	information to identif	y your case:		
Debtor 1	Itai Aaronson First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filling	ng) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the	e: District of Oregon		¥
Case numbe (If known)	er	· · · · · · · · · · · · · · · · · · ·		

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

2.1 Priority Creditor's Name When was the debt incurred?	any a	additional pages, write your name and case num	per (II kilown).				
✓ No. Go to Part 2. ✓ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and each claim listed, identify what type of claim it is. If a claim has both priority and one priority amounts, list that claim here and show both priority and each claim list that claim here and show both priority and encounts, list that claim here and show both priority and encounts, list that claim here and show both priority and encounts, list that claim, list the claim is the creditor's name. If you have more than two priority and encounts, list that claim here and show both priority and encounts, list that claim here and show both priority and each claim is the creditor's name. If you have more than two priority and each claim, list the claim is the claim show both priority and each claim. For a same than two priority and each claim in the creditor's name. If you have more than two priority and each claim in the reditor had be dead on the reditor's name. If you have more than two priority and each claim in the reditor's name. If you have more than two priority and each claim in the reditor's name. If you have more than two priority and enterior in the reditor's name. If you have more than two priority and enterior in the reditor's name. If you have more than tw							
No. Go to Part 2.	1. D	o any creditors have priority unsecured claims	against you?				II.
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. Priority and each claim listed, identify what type of claim it is. If a claim has both priority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claim has both priority and nonpriority amounts. As much as possible, list the claim has both priority and nonpriority amounts. As much as possible, list the claim is in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Unliquidated Unliquidated Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Claims for death or personal injury while you were laterated the textured claims to the textured claim to the textured claim.		_	•				4
each claim listed, identify what type of claim its. It a claim has both plotty and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority nonpriority amounts. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim		☐ Yes.				tale for anol	oloim For
2.1 Contingent Unliquidated Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Claims for death or personal injury while you were interested Claims for death or personal injury while you were interested Claims for death or personal injury while you were interested Claims for death or personal injury while you were interested Claims for death or personal injury while you were interested Claims for death or personal injury while you were interested Claims for death or personal injury while you were interested Claims for death or personal injury while you were interested Claims for death or personal injury while you were interested Claims for death or personal injury while you were interested Claims for death or personal injury while you were interested Claims for death or personal injury while you were interested Claims for death or personal injury while you were Claims for death or personal injur	ea no	ach claim listed, identify what type of claim it is. If a compriority amounts. As much as possible, list the claims fill out the Continuation Page of P	aims in alphabetical order according to the creditor's not lart 1. If more than one creditor holds a particular claim	ame If v	vou have r	more than t	vo priority
Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intentioned.	(F	For an explanation of each type of claim, see the in:	structions for this form in the instruction booklet.)	Total	claim	Priority	Nonpriority
Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intentioned.							·
Priority Creditor's Name When was the debt incurred? As of the date you file, the claim is: Check all that apply. City State ZIP Code Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were interpretable.	2.1		Last 4 digits of account number	\$		\$	_ \$
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were interpreted.		Priority Creditor's Name					
City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were		Number Street					
City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were	1		As of the date you file, the claim is: Check all that apply	1.			
City State ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Claims for death or personal injury while you were			☐ Contingent				
□ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Claims for death or personal injury while you were		City State ZIP Code	· ·				
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Claims for death or personal injury while you were		Who incurred the debt? Check one.	☐ Disputed ·				
Debtor 1 and Debtor 2 only At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were		☐ Debtor 1 only					
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were		· ·					
☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were							•
intervigated	1						
RIIONIOGEO			 Claims for death or personal injury while you were intoxicated 				
Is the claim subject to offset? Other. Specify			Other. Specify	_			
☐ No ☐ Yes					ger consequences		
2.2 Last 4 digits of account number \$\$	22	165	Last 4 digits of account number	\$		\$	
Priority Creditor's Name When was the debt incurred?		Priority Creditor's Name	_				
Number Street As of the date you file, the claim is: Check all that apply.		Number Street	As of the date you file, the claim is: Check all that appl	у.			
☐ Contingent			☐ Contingent				
City State ZIP Code Unliquidated		City State ZIP Code	☐ Unliquidated				
Who incurred the debt? Check one.		•	☐ Disputed				
Debtor 1 only Type of PRIORITY unsecured claim:			Type of PRIORITY unsecured claim:				
Debtor 2 only Domestic support obligations	1	•					
Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government		Debtor 1 and Debtor 2 only		t			
At least one of the debtors and another Claims for death or personal injury while you were		At least one of the debtors and another					
Check if this claim is for a community debt intoxicated		Check if this claim is for a community debt					
Is the claim subject to offset?		is the claim subject to offset?	Other. Specify	_			
□ No		☐ No					
☐ Yes Case 19-62384-tmr11 Doc 1-1 Filed 08/05/19		☐ Yes Case 19-62	2384-tmr11 Doc 1-1 Filed 08/05/1	9			

Debtor	1
Denio	

Itai Aaronson Middle Name

First Name

Last	Name

Case number (# known)__

listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriorit amount
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated ,			
Who incurred the debt? Check one.	* DDIODITY unaccured alaim:			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
 Debtor 1 and Debtor 2 only At least one of the debtors and another 	 Taxes and certain other debts you owe the government Claims for death or personal injury while you were 			
	intoxicated			
☐ Check if this claim is for a community debt	Other. Specify			
Is the claim subject to offset?				
☐ No ☐ Yes				
	Last 4 digits of account number	\$	_ \$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
☐ At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other, Specify			
Is the claim subject to offset?	Cities, Specify			
☐ No				
		ann e agus an cheann an		and the Committee of th
	Last 4 digits of account number	\$	\$. \$
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply	<i>i</i> .		
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
Sity .	☐ Disputed			
Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:			
Debtor 1 only				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	 Domestic support obligations Taxes and certain other debts you owe the government 			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated	ELAN SERSYAMINETE NESSEL (FORESELEN		amilianeerikaan ka 1969 Piink
	Other. Specify	_		
Is the claim subject to offset?		•		
□ No □ Yes ———Case 19-6	2384-tmr11 Doc 1-1 Filed 08/05/1	_		

_		
De	btor	•

or 1	Itai Aaror	nson		
/I E	First Name	Middle Name	Last Name	

Case number	(it known)	 	

Part 2: List All of Your NONPRIORITY Unsecured Claims

	any creditors have nonpriority uns No. You have nothing to report in this Yes	s part. Subn	nit this form to the	court with your other schedules.		
nor	t all of your nonpriority unsecured npriority unsecured claim, list the cred luded in Part 1. If more than one cred ims fill out the Continuation Page of F	iitor separat itor holds a	he alphabetical o ely for each claim particular claim, li	order of the creditor who holds each claim. If a creditor has. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three nor	more ti list clair priority	nan one ms already v unsecured
cia	IIIIS IIII OUL IIIE COMMIDATION FAGE OFF	w. t = -			Total	c(alm
	Sank of America			Last 4 digits of account number	\$	45,000.00
— _№ 1	onpriority Creditor's Name 00 North Tryon Street			When was the debt incurred? $08/05/2019$		
C	umber Street Charlotte	NC State	28255 ZIP Code	As of the date-you file, the claim is: Check all that apply.		
	•			☑ Contingent☑ Unliquidated		
	Who incurred the debt? Check one. Debtor 1 only			Uniquidated Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			Student loansObligations arising out of a separation agreement or divorce		
	Check if this claim is for a commu	nity debt		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
Ţ	s the claim subject to offset?			✓ Other Specify Credit cards		
·coc.	Ves		el terretario (el ligera de la terreta la terreta de la composição de la composição de la composição de la comp	Last 4 digits of account number	\$	21,000.00
	American Express Nonpriority Creditor's Name			When was the debt incurred?		
١	World Financial Center					
	New York	NY	10285	As of the date you file, the claim is: Check all that apply.		
	City Charles and Charles and	State	ZIP Code	Contingent Unliquidated		
	Who incurred the debt? Check one. Debtor 1 only			Disputed		
- 1	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	 Debtor 1 and Debtor 2 only At least one of the debtors and another 	r		Student loansObligations arising out of a separation agreement or divorce		
!	Check if this claim is for a commu	ınity debt		that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt	S	
	Is the claim subject to offset?			Other. Specify Credit cards		
	51	· opposite til state sta	artematura e e e e e e e e e e e e e e e e e e e		et samme ver statistic es	g var statististististististististististististist
4.3				Last 4 digits of account number	\$	
	Nonpriority Creditor's Name			When was the debt incurred?		
	Number Street	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
	City	State	ZI 0000	Contingent		
	Who incurred the debt? Check one. Debtor 1 only			☐ Unliquidated ☐ Disputed		
	Debtor 2 only			·		
	Debtor 1 and Debtor 2 only	_		Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another			☐ Student loans		
	Check if this claim is for a comm	unity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset? ☐ No ☐ Yes			☐ Debts to pension or profit-sharing plans, and other similar deb☐ Other. Specify	ts -	
	Ca	se 19-6	2384-tmr11	Doc 1-1 Filed 08/05/19		

Debtor	1
DEDIDI	3

tai Aaron	son		
	Middle Name	Last Name	

Case number (if know	m)
COSC HURBON IN MISS	.,,

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim	
	Last 4 digits of account number	\$	
Nonpriority Creditor's Name	When was the debt incurred?		
Number Street	As of the date you file, the claim is: Check all that apply.		
City State ZIP Code	Contingent Unliquidated		
Who incurred the debt? Check one.	Disputed		
Debtor 1 only	Type of NONPRIORITY unsecured claim:		
Debtor 2 only			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that		
	you did not report as priority claims		
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?	Other. Specify		
□ No □ Yes			
	Last 4 digits of account number	\$	
Nonpriority Creditor's Name	When was the debt incurred?		
Number Street	As of the date you file, the claim is: Check all that apply.		
City State ZIP Code	☐ Contingent ☐ Unliquidated		
Who incurred the debt? Check one.	☐ Disputed		
Debtor 1 only	Type of NONPRIORITY unsecured claim:		
Debtor 2 only			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce that		
	you did not report as priority claims		
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?	Other. Specify		
☐ No ☐ Yes		al proprieta especial de la compansión de	
	Last 4 digits of account number	\$	
Nonpriority Creditor's Name	When was the debt incurred?		
Number Street	As of the date you file, the claim is: Check all that apply.		
City State ZIP Code	☐ Contingent ☐ Unliquidated		
Who incurred the debt? Check one.	☐ Disputed		
☐ Debtor 1 only	Type of NONPRIORITY unsecured claim:		
Debtor 2 only			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?	Other. Specify		
□ No □ Yes			

Debtor 1	1
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Itai Aaronson First Name Mic

Middle Name

•		NI	
1	asi	Name	

Case number	(if known)	 	 _	
Oddo name.	(III			

Part 3:

List Others to Be Notified About a Debt That You Already Listed

which entry in Part 1 or Part 2 did you list the original creditor? e of (Check one): Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured Claims a which entry in Part 1 or Part 2 did you list the original creditor? The of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured claims aims st 4 digits of account number
Part 2: Creditors with Nonpriority Unsecured Claims a which entry in Part 1 or Part 2 did you list the original creditor? The of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured claims aims st 4 digits of account number
n which entry in Part 1 or Part 2 did you list the original creditor? The of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured aims st 4 digits of account number
n which entry in Part 1 or Part 2 did you list the original creditor? The of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured aims st 4 digits of account number
which entry in Part 1 or Part 2 did you list the original creditor? The of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured aims st 4 digits of account number
ne of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured aims st 4 digits of account number
Part 2: Creditors with Nonpriority Unsecured aims
aims st 4 digits of account number
which entry in Part 1 or Part 2 did you list the original creditor?
which entry in Part 1 or Part 2 did you list the original creditor?
I WINCH CITTY III FAIL FOR FAILE AND YOU NOT THE ONIGHNAL STREET
ne of (Check one): 🚨 Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured
aims
st 4 digits of account number
n which entry in Part 1 or Part 2 did you list the original creditor?
ne of (Check one): Deart 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured
aims
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n which entry in Part 1 or Part 2 did you list the original creditor?
ne of (Check one): Part 1: Creditors with Priority Unsecured Claims
Part 2: Creditors with Nonpriority Unsecured laims
ast 4 digits of account number
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ne of (Check one): Part 1: Creditors with Priority Unsecured Claim
Part 2: Creditors with Nonpriority Unsecured
laims
ast 4 digits of account number
n which entry in Part 1 or Part 2 did you list the original creditor?
ine of (Check one): Part 1: Creditors with Priority Unsecured Claim
Part 2: Creditors with Nonpriority Unsecured

Debtor 1

Itai Aaronson

Firet Nama

Middle Name

Last Name

Case number (if known)_____

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$0.00
	6e. Total . Add lines 6a through 6d.	6e.	\$0.00
			Total claim
Total claims	6f. Student loans	6f.	\$0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6i.	+ \$ 66,000.00
	6j. Total. Add lines 6f through 6i.	6j.	\$ 66,000.00

			- राज्यों का अध्यक्ष कृषि कुल्या संस्थि	Parellina (1997)				
Fill	in this in	formation to iden	tify your case:	1 al	Lin			
Deb	tor _	THE Name	Middle Name	Last Name	30.1			
(Spo	tor 2 use if filing)		Middle Name	Last Name				
Unit	ed States B	sankruptcy Court for	the: D	District of				
	e number nown)			<u> </u>			☐ Check if amende	
		orm 106G					•	
Sc	hedu	ıle G: Ex	ecutory	Contracts ar	d Unex	pired Leases	5	12/15
infor	mation, if	more space is n	is possible. If two eeded, copy the a nme and case nur	married people are filing additional page, fill it out mber (if known).	together, both number the en	are equally responsible tries, and attach it to this	for supplying correct s page. On the top of	any
!	🔽 No. Cl 🔲 Yes. F	heck this box and fill in all of the info	rmation below eve	the court with your other so on if the contracts or leases	are listed on Sc	hedule A/B: Property (Otti	cial Form 106A/B).	
	List sepai example, unexpired	rent, vehicle lea	on or company wi se, cell phone). S	ith whom you have the co ee the instructions for this	ontract or lease. form in the instru	. Then state what each c action booklet for more exa	ontract or lease is for imples of executory cor	(for ntracts and
	Person o	r company with v	whom you have ti	he contract or lease	Sta	te what the contract or le	ease is for	
2.1								
	Name							
	Number	Street						
	City		State ZIP C	ode				THE TALL SACROVERS THE TALL SACROVERS
2.2	99447778007,03 VVATORIANS							
	Name							
	Number	Street						
	City		State ZIP C	Code			TO I WART WITH THE PART THE TRANSPORT AND THE PART OF THE	
2.3	Name		<u> </u>					
	Number	Street						
	City		State ZIP 0	Code	<u>-</u>			
2.4	Sicological		o e a contrata e a compresa e compresa de la contrata e el secución de está decompre a contra	**************************************				
	Name							
	Number	Street						
	City		State ZIP C	Code				versette eller i vivil et et et et et et
2.5	31				·			
	Name	OL 1						
	Number	Street						
1	City		State ZIP (Code			•	

Debtor 1

First Name	Middle Name	Last Name	

Case number (if known)	
------------------------	--

Additional Page if You Have More Contracts or Leases

Person or company with whom you have the contract or lease

What the contract or lease is for

22						
	Name					
	Number	Street				
	City	<u> </u>	State	ZIP Gode		
2	majora, 27277712000 (1900 or 1/1)		The second section of the second section of the second second second second second second second second second	erry merce a de la compactica de la compac	a dense field i vie grovest at transferiencie est un gesting i positione automaté e 1,000 mp.	
	Name					
	Number	Street				
	City		State	ZIP Code		
2		ecenta e seconocionente e e e e e e e e e e e e e e e e e			agentyma (1900–190 <u>0), a santa sa</u>	
	Name					
	Number	Street				
	City		State	ZIP Code		
2					was and the state of the state	
	Name					
	Number	Street				-
	City		State	ZIP Code		
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2	Name					-
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2	Name					-
	Number	Street				_
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	City	ezproped and Colored Greeken with			n de esta hitto e titorio esta esta esta de la constitución e esta esta esta esta en esta esta esta esta esta e	
2	Name					-
		Street				-
	Number			710 0-1-		- .
ANDARY.	City		State	ZIP Code		

Fill in this information to identify your case:	
Debtor 1 HOLOV Last Name Last Name	10M
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: District of	
Case number	
(If known)	Check if this is at amended filing
	anonasa iling
Official Form 106H	
Schedule H: Your Codebtors	12/15
are filing together, both are equally responsible for supplying correct and number the entries in the boxes on the left. Attach the Additional case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list	information. If more space is needed, copy the Additional Page, fill it out, Page to this page. On the top of any Additional Pages, write your name ar either space as a codebtor.)
1. Do you have any codeptors? (If you are filling a joint case, do not use	Child appeare as a secondary
☐ Yes	
2. Within the last 8 years, have you lived in a community property st	ate or territory? (Community property states and territories include
Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Ri	co, Texas, Washington, and Wisconsin.)
✓ No. Go to line 3.✓ Yes. Did your spouse, former spouse, or legal equivalent live with	you at the time?
□ No	
Yes. In which community state or territory did you live?	. Fill in the name and current address of that person.
Name of your spouse, former spouse, or legal equivalent	
Number Street	
Maniper 24664	
City State	ZIP Code
 In Column 1, list all of your codebtors. Do not include your spous shown in line 2 again as a codebtor only if that person is a guara Schedule D (Official Form 106D), Schedule E/F (Official Form 106 Schedule E/F, or Schedule G to fill out Column 2. 	ntor or cosigner. Make sure you have listed the creditor on
Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
	Check all schedules that apply:
3.1	
Name	Schedule D, line Schedule E/F, line
Number Street	Schedule G, line
City State	ZIP Code
3.2	Schedule D, line
Name	Schedule E/F, line
Number Street	☐ Schedule G, line

☐ Schedule D, line _

☐ Schedule E/F, line ____
☐ Schedule G, line ____

City

Name

Number

Street

3.3

Debi	tor	1

			Case number (if known)	
Sicet Name	Middle Name	Last Name		

	Addi	itional Page to Li	ist More Codebtors		
	Column 1: Yo	our codebtor			Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3					Schedule D, line
	Name				☐ Schedule E/F, line
					─ ☐ Schedule G, line
	Number	Street			
	City		State	ZIP Code	
3	No. 24 Control of the				Schedule D, line
	Name				☐ Schedule E/F, line
					Schedule G, line
	Number	Street			2 66/104410 5, 31/2
	City		State	ZIP Code	
з					Schedule D, line
	Name				☐ Schedule E/F, line
		Chinal Transfer of the China			Schedule G, line
	Number	Street			
	City		State	ZIP Code	
3	a — Adamir Ariv I Palam America — Adamir and America	and the second s	A transfer of the second secon		
	Name				Schedule D, line
			_		☐ Schedule E/F, line ☐ Schedule G, line
	Number	Street			Goriedate G, line
	City		State	ZIP Code	
3					Schedule D, line
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	City		State	ZIP Code	
3		100 mm	H - Carrier and Carrier College 1 (1999) (1999) (1999) (1999) (1999) (1999) (1999) (1999) (1999) (1999) (1999)		
	Name				Schedule D, line
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3			A CALLES TO SERVICE AND A SERVICE AND A SERVICE AND A SERVICE AND A SERVICE ASSESSMENT ASSESSMENT ASSESSMENT AS A SERVICE		O objects B Ver
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	City		State	ZIP Code	
1					

ise:		
	l	
Name Last Name		
Name Last Name		,
District of		
	Check if t	his is:
		ended filing
		olement showing postpetition chapter e as of the following date:
	MM / E	DD / YYYY
ncome		12/19
Debtor 1		Debtor 2 or non-filing spouse
		☐ Employed ☐ Not employed
	,	,
oation		
oyer's name		
oyer's address		
Number Stree	et	Number Street
City	State ZIP Code	City State ZIP Code
		·
ong employed there?		
ong employed there?		
	If two married people are filing to narried and not filing jointly, and yot filing with you, do not include it any additional pages, write your not people are filing to not include it any additional pages, write your not not people are filing to not include it any additional pages, write your not	An am A supplincome If two married people are filing together (Debtor 1 and Debtor narried and not filing jointly, and your spouse is living with yot filing with you, do not include information about your spouse any additional pages, write your name and case number (if it is possible to the possible

Case 19-62384-tmr11 Doc 1-1 Filed 08/05/19

Itai Aaronson

iret	* 1				Middle	. ki.

Last Name

Case number (if known)_

			For I	Debtor 1	For Debtor 2 or non-filing spouse	
Co	py line 4 here	→ 4.	\$	0.00	\$	
	t all payroll deductions:			0.00		
	a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	
5	b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	
5	c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	
5	d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	
5	e. Insurance	5e.	\$	0.00	\$	
5	f. Domestic support obligations	5f.	\$	0.00	\$	
5	g. Union dues	5g.	\$	0.00	\$	
	h. Other deductions. Specify:	5h.	+\$	0.00	+ \$	
		. 6.	\$	0.00	¢	
6. A	dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	. 0.	Φ	0.00	Ψ	
7. C	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	
8. L .i	st all other income regularly received:					
8	a. Net income from rental property and from operating a business,					
	profession, or farm					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		Φ	0.00	e	
	monthly net income.	8a.	Φ		φ	
	b. Interest and dividends	8b.	\$	0.00	\$	
8	 Family support payments that you, a non-filing spouse, or a dependence regularly receive 	ent				
	Include alimony, spousal support, child support, maintenance, divorce	8c.	\$	0.00	\$	
	settlement, and property settlement.	8d.	\$	0.00	\$	
	d. Unemployment compensation	8e.	\$	0.00	\$	
	e. Social Security	00.	Ψ		<u> </u>	
8	if. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	nce				÷
	Specify:	8f.	\$	0.00	\$	
	g. Pension or retirement income	8g.	\$	0.00	\$	
	•	•	Ψ		<u> </u>	
8	h. Other monthly income. Specify:	8h.	+\$	0.00	+\$	7
9. A	dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00	\$	
10. C a	alculate monthly income. Add line 7 + line 9. Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	. \$	0.00	\$	= \$0.00
In	tate all other regular contributions to the expenses that you list in Sche clude contributions from an unmarried partner, members of your household, ends or relatives.	your o	J. depende	nts, your roon	nmates, and other	
	o not include any amounts already included in lines 2-10 or amounts that are	not a	vailable	to pay expens	ses listed in Schedule J.	
S	pecify:				11.	. + \$ 0.00
12. A (dd the amount in the last column of line 10 to the amount in line 11. The rite that amount on the Summary of Your Assets and Liabilities and Certain	e resul <i>Statist</i>	It is the o tical Info	combined mor rmation, if it ap	oplies 12.	Combined monthly income
	o you expect an increase or decrease within the year after you file this No.	form'	?			<u>-</u>
	Yes. Explain:					

Filli	n this information to identify	your case:				
	Itai Aaronson					
Debto	First Name	Middle Name Last	Name	eck if this is:		
Debto (Spou	or 2 se, if filing) First Name	Middle Name Last		An amended fil		etition chapter 13
Unite	d States Bankruptcy Court for the:	District of Oregon		expenses as of	f the following	date:
	number	<u>.</u>		MM / DD / YYYY		
(If kno						
Offi	cial Form 106J					
	hedule J: Yo	ur Expenses				12/15
inform (if kno	nation. If more space is need own). Answer every question	ed, attach another sheet to th	e are filing together, both are e nis form. On the top of any add	equally responsi ditional pages, w	ble for supplyi rrite your name	ng correct e and case number
Part	· · · · · · · · · · · · · · · · · · ·	Isenola			<u> </u>	
	his a joint case?					
	No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?				
	☐ No ☐ Yes. Debtor 2 must fil	le Official Form 106J-2, Expens	es for Separate Household of D	ebtor 2.		
	you have dependents?	No	Dependent's relationsh	ilp to	Dependent's age	Does dependent live with you?
	not list Debtor 1 and otor 2.	Yes. Fill out this informat each dependent	(IOI) IOI			: 🗹 No
	not state the dependents'		Daughter			☐ Yes
nan	nes.					□ No
٠						☐ Yes
						U No □ Yes
						□ No
						☐ Yes
						□ No
						☐ Yes
exp	your expenses include penses of people other than urself and your dependents?	☑ No ☐ Yes		, and a second of the second o		
Part 2	and the state of t	ing Monthly Expenses				
Estim exper applie	nate your expenses as of you nses as of a date after the ba cable date. de expenses paid for with no	ir bankruptcy filing date unles nkruptcy is filed. If this is a s on-cash government assistance	ss you are using this form as a upplemental Schedule J, checked if you know the value of	a supplement in	a Chapter 13 of top of the form	n and in the
		ed it on Schedule I: Your Inco		ts and	**************************************	800
	ne rental or home ownership my rent for the ground or lot.	expenses for your residence	. Include first mortgage paymen	4.	\$	800_
if	not included in line 4:			4-	¢	250
48				4a.	φ g	100
41	• •			4b.	Ψ S	75
40				4c.	Ψ	0
40	d. Homeowner's association	or condominium dues		4d.	Ψ	 _

Case 19-62384-tmr11 Doc 1-1 Schedule J: Your Expenses Filed 08/05/19

Debtor 1

Itai Aaronson
----- Middle Name

rst Name	Middle

Case number (if known)	
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			rour expense.	,
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$	
6.	Utilities: 6a. Electricity, heat, natural gas	6a.	\$	200
	· · · · · · · · · · · · · · · · · · ·	€b.	\$	45_
	- and additional and additional applications	6c.	\$	175_
		6d.	\$	0
_		7.	\$	450
	Food and housekeeping supplies	8.	\$	0
	Childcare and children's education costs	9.	Ψ \$	25
	Clothing, laundry, and dry cleaning	9. 10.	Ψ \$	35
10.	Personal care products and services	11.	Ψ	150
	Medical and dental expenses	11.	Ψ	
12,	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	300_
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0
14.	The state of the s	14.	\$	0_
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	
	15b. Health insurance	15b.	\$	
	15c. Vehicle insurance	15c.	\$	100
	15d. Other insurance. Specify:	15d.	\$	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0_
17.	Installment or lease payments:			0
	17a. Car payments for Vehicle 1	17a.	\$	0
	17b. Car payments for Vehicle 2	17b.	\$	0
	17c. Other. Specify:	17c.	\$	0
	17d. Other. Specify:	17d.	\$	0
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0
19.	Other payments you make to support others who do not live with you.			0
	Specify:	19.	\$	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		•	0
	20a. Mortgages on other property	20a.	\$	
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	
	and Hamaguran's association or condominium dues	20e.	\$	0_

Debtor 1	Itai Aaronson First Name Middle Name Last Name	Case number (if known)	
21. Other.	Specify:	21.	+\$
22. Calcul	ate your monthly expenses.		of account of the contract of
22a. A	dd lines 4 through 21.	22a.	\$
22b. C	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$
22c. A	dd line 22a and 22b. The result is your monthly expenses.	22 c.	\$2,705
23. Calcula	ite your monthly net income.		0
23a. C	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$
23b. C	Copy your monthly expenses from line 22c above.	23b.	-\$ 2,705
	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c .	\$(2705)
24. Do yo u	expect an increase or decrease in your expenses within the year after you	file this form?	
For exa	ample, do you expect to finish paying for your car loan within the year or do you e ge payment to increase or decrease because of a modification to the terms of yo	expect your ur mortgage?	
☑ No.			and the second s
☐ Yes.	Explain here:		

n this in	formation to identi	fy your case:			
ior 1	Itai Aaronson	Middle Name	Last Name		
or 2		Middle Name	Last Name		
use, if filing)			Fa2((Additio		
ed States i e number	Bankruptcy Court for th	e: District of Oregon			
iown)					Check if this amended fil
	l Form 106[1
ecl	aration <i>I</i>	About an I	<u>Individua</u>	l Debtor's Schedu	ies 12
	ried neonle are filin	g together, both are e	qually responsible for	or supplying correct information.	
u must i	file this form when money or property	ever vou file hankrupt	cy schedules or ame n with a bankruptcy	nded schedules. Making a false stateme case can result in fines up to \$250,000, c	ent, concealing property, o or imprisonment for up to
ou must fotaining i	file this form when money or property ooth. 18 U.S.C. §§ 1 Sign Below	ever you file bankrupto by fraud in connection 52, 1341, 1519, and 35	cy schedules or ame n with a bankruptcy (71.	nded schedules. Making a false stateme	ent, concealing property, o or imprisonment for up to
Did you	file this form when money or property ooth. 18 U.S.C. §§ 1 Sign Below	ever you file bankrupto by fraud in connection 52, 1341, 1519, and 35	cy schedules or ame n with a bankruptcy (71.	nded schedules. Making a faise stateme case can result in fines up to \$250,000, c	or imprisonment for up to
Did you	file this form when money or property ooth. 18 U.S.C. §§ 1 Sign Below	ever you file bankrupto by fraud in connection 52, 1341, 1519, and 35	cy schedules or ame n with a bankruptcy (71.	nded schedules. Making a faise stateme case can result in fines up to \$250,000, c	or imprisonment for up to
Did you	file this form when money or property oth. 18 U.S.C. §§ 1 Sign Below	ever you file bankrupto by fraud in connection 52, 1341, 1519, and 35	cy schedules or ame n with a bankruptcy (71.	nded schedules. Making a faise stateme case can result in fines up to \$250,000, o p you fill out bankruptcy forms?	or imprisonment for up to
Did you Lars, or b	sign Below u pay or agree to pay. Name of person	ever you file bankrupto by fraud in connection 52, 1341, 1519, and 35 ay someone who is NO	cy schedules or ame n with a bankruptcy of 71. OT an attorney to hel	nded schedules. Making a faise stateme case can result in fines up to \$250,000, o p you fill out bankruptcy forms?	or imprisonment for up to
Did you La Yes Under	sign Below sign Below Name of person	ever you file bankrupto by fraud in connection 52, 1341, 1519, and 35 ay someone who is NO	cy schedules or ame n with a bankruptcy of 71. OT an attorney to hel	p you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's No. Signature (Official Form 119).	or imprisonment for up to

Date _____

ebtor 1	Itai Aaronson				
	First Name	Middle Name	Last Name		
ebtor 2 pouse, if filing) First Name	Middle Name	Last Name		
nited States	Bankruptcy Court for the:	District of Oregon			
ase number					Check if this is a
f known)					amended filing
ec · i i	E 407				
	Form 107_		e 4 17	· · · · · · · · · · · · · · · · · · ·	tos z 04
				iduals Filing for Bankr	
. What is		status?			
Not n During t	he last 3 years, have				
Not n During t					
During t V No Yes.	he last 3 years, have		years. Do not include		Dates Debtor 2 lived there
During t V No Yes.	he last 3 years, have		ears. Do not include	e where you live now. Debtor 2:	lived there
During t V No Yes.	he last 3 years, have		years. Do not include	where you live now.	lived there
☐ Not r During t M No □ Yes. De	he last 3 years, have List all of the places y		years. Do not include	Debtor 2: Same as Debtor 1	Same as Debto
During t ☑ Not r ☑ No ☐ Yes. De	he last 3 years, have		years. Do not include Dates Debtor 1 lived there	e where you live now. Debtor 2:	lived there Same as Debte
During t ☑ Not r ☑ No ☐ Yes. De	he last 3 years, have List all of the places y		years. Do not include Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1	lived there Same as Debto
During t V No Yes. De	the last 3 years, have List all of the places yellow 1: umber Street		years. Do not include Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1	lived there Same as Debto From To
During t ☑ Not r ☑ No ☐ Yes. De	the last 3 years, have List all of the places yellow 1: umber Street	rou lived in the last 3 y	years. Do not include Dates Debtor 1 lived there	e where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIP C	lived there Same as Debto From To ode
During t V No Yes. De	the last 3 years, have List all of the places yellow 1: umber Street	rou lived in the last 3 y	years. Do not include Dates Debtor 1 lived there	Debtor 2: Same as Debtor 1 Number Street	lived there ☐ Same as Debte From To ode ☐ Same as Debte
During t Yes. De	the last 3 years, have List all of the places yellow 1: umber Street	rou lived in the last 3 y	pears. Do not include Dates Debtor 1 lived there From To	e where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIP C	Ilved there Same as Debto From To ode Same as Debto From
During to No Yes. De	the last 3 years, have List all of the places yebtor 1: umber Street	rou lived in the last 3 y	vears. Do not include Dates Debtor 1 lived there From To	e where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIP C	lived there ☐ Same as Debto From To ode ☐ Same as Debto
During to No Yes. De	the last 3 years, have List all of the places yebtor 1: umber Street	rou lived in the last 3 y	pears. Do not include Dates Debtor 1 lived there From To	e where you live now. Debtor 2: Same as Debtor 1 Number Street City State ZIP C	Ilived there Same as Debto From To ode Same as Debto From
During t V No Yes. De	the last 3 years, have List all of the places yebtor 1: umber Street	rou lived in the last 3 y	pears. Do not include Dates Debtor 1 lived there From To	Same as Debtor 1 Number Street City State ZIP C Number Street	Iived there Same as Debte From To ode Same as Debte From

Part 2: Explain the Sources of Your Income

otor 1 Itai Aaronson		Case nur	···- · · · · · · · · · · · · · · · · ·			
First Name Middle Name Last N	łame					
Eill in the total amount of income you received	nt or from operating a business during this year or the two previous calendar years? ad from all jobs and all businesses, including part-time activities. some that you receive together, list it only once under Debtor 1.					
☑ No						
Yes, Fill in the details.						
	Debtor 1		Debtor 2			
	Sources of Income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
From January 1 of current year until	☐ Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$		
the date you filed for bankruptcy:	Operating a business		Operating a business			
For last calendar year:	Wages, commissions, bonuses, tips	\$	☐ Wages, commissions, bonuses, tips	\$		
(January 1 to December 31,	Operating a business	T	Operating a business			
For the calendar year before that:	☐ Wages, commissions, bonuses, tips		Wages, commissions, bonuses, tips	¢		
(January 1 to December 31,	Operating a business	\$	Operating a business	Ψ		
Include income regardless of whether that inc	come is taxable. Example:	s of <i>otner income</i> are all ome: interest: dividends:	Ittottea collected nour raw-	Julia, Toyullioo, aria		
Include income regardless of whether that inc unemployment, and other public benefit payn gambling and lottery winnings. If you are filing List each source and the gross income from o	come is taxable. Example: nents; pensions; rental inc g a joint case and you hav	s of <i>other income</i> are and come; interest; dividends e income that you receive	red together, list it only once	dita, royanioo, and		
Include income regardless of whether that incure unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from a No	come is taxable. Example: nents; pensions; rental inc g a joint case and you hav	s of <i>other income</i> are and come; interest; dividends e income that you receive	red together, list it only once	dita, royanioo, and		
Include income regardless of whether that inc unemployment, and other public benefit payin gambling and lottery winnings. If you are filing List each source and the gross income from o	come is taxable. Example: nents; pensions; rental inc g a joint case and you hav	s of <i>other income</i> are and come; interest; dividends e income that you receive	red together, list it only once	dita, royanioo, and		
Include income regardless of whether that incure unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from a No	come is taxable. Example: nents; pensions; rental inc g a joint case and you hav each source separately. D	s of <i>other income</i> are and come; interest; dividends e income that you receive	red together, list it only once	Gross income from each source		
Include income regardless of whether that incure unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from a No Yes. Fill in the details.	come is taxable. Example: nents; pensions; rental incg a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	red together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	e under Debtor 1. Gross income from each source (before deductions an		
Include income regardless of whether that incure unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from a No	come is taxable. Example: nents; pensions; rental incg a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	red together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	e under Debtor 1. Gross income from each source (before deductions an		
Include income regardless of whether that incure unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until	come is taxable. Example: nents; pensions; rental incg a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	red together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	e under Debtor 1. Gross income from each source (before deductions an		
Include income regardless of whether that incure unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	come is taxable. Example: nents; pensions; rental incg a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	red together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	e under Debtor 1. Gross income from each source (before deductions an		
Include income regardless of whether that income unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from the Mo Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year:	come is taxable. Example: nents; pensions; rental incg a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	ped together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions an		
Include income regardless of whether that incure unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from a No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	come is taxable. Example: nents; pensions; rental incg a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions) \$	ped together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	e under Debtor 1. Gross income from each source (before deductions an		
Include income regardless of whether that incument unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from the No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	come is taxable. Example: nents; pensions; rental incg a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions) \$	ped together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	e under Debtor 1. Gross income from each source (before deductions an		
Include income regardless of whether that incument unemployment, and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from the No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	come is taxable. Example: nents; pensions; rental incg a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions) \$	ped together, list it only once at you listed in line 4. Debtor 2 Sources of income Describe below.	e under Debtor 1. Gross income from each source (before deductions an		

Debto	- 1	į
DEDIO		

Itai Aaronson		Case number (if known)
First Name Middle Name	Last Name	

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

	er Debtor 1's or Debtor 2's debts primarily co Neither Debtor 1 nor Debtor 2 has primarily	consumer dei	ots. Consumer debts are	e defined in 11 U.S.C. § 101(8) as				
2 190.	"inquired by an individual primarily for a personal, farmly, or nouseriou purpose.								
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?								
	☐ No. Go to line 7.								
	Yes. List below each creditor to whom you total amount you paid that creditor. Do child support and alimony. Also, do no	t include paym	ents to an attorney for t	his bankruptcy case.					
	* Subject to adjustment on 4/01/22 and every 3	years after the	at for cases filed on or a	fter the date of adjustment.					
1 .v	Debtor 1 or Debtor 2 or both have primarily								
J Yes	During the 90 days before you filed for bankrup	tcy, did you pa	ay any creditor a total of	\$600 or more?					
		•							
	No. Go to line 7.			tal amount you naid that					
	Yes. List below each creditor to whom you creditor. Do not include payments for	paid a total of	\$600 or more and the to ort obligations, such as	child support and					
	alimony. Also, do not include payment	is to an attorne	ey for this bankruptcy ca	ise.					
			T-(-)	Amount you still owe	Was this payment for				
		Dates of payment	Total amount paid	Amount jou our our	•				
				œ.	☐ Mortgage				
	Creditor's Name		\$	\$	☐ Mortgage				
	Cleditol a Islanio				Credit card				
	Number Street				Loan repayment				
					Suppliers or vendor				
					Other				
	City State ZIP Code				Utilei				
			The second second second second	and the second of the second of	•				
			\$	\$	☐ Mortgage				
	Creditor's Name				☐ Car				
					Credit card				
					Loan repayment				
	Number Street								
	Number Street								
	Number Street				Suppliers or vendor				
	Number Street City State ZIP Code				☐ Suppliers or vendor				
					Suppliers or vendor				
			\$		☐ Suppliers or vendor ☐ Other				
			\$	\$ \$	☐ Suppliers or vendor ☐ Other				
	City State ZIP Code		\$	\$	☐ Suppliers or vendor ☐ Other				
	City State ZIP Code		\$		☐ Suppliers or vendo ☐ Other ☐ Mortgage ☐ Car				
	City State ZIP Code Creditor's Name		\$	\$\$	Suppliers or vendo Other Mortgage Car Credit card				

4	Itai Aaronson				Case number (if known)				
tor 1	First Name Middle	Name	Last Name						
Inside corpo agent	ithin 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? siders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; proporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing gent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
☑ Y	o es. List all payments	to an insider.		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment		
					_	œ.			
	Insider's Name		·		\$	_ P			
	Number Street								
	City	State	ZIP Code						
	City	Çilli				•			
					\$	_ \$			
	Insider's Name								
	Number Street								
									
	City	State	ZIP Code						
an ir Inclu	nsider? ide payments on debt	s guaranteed	d or cosigned by		payments or trans Total amount paid		on account of a debt that benefited Reason for this payment Include creditor's name		
					œ	\$			
	Insider's Name				Ψ		•		
	Number Street								
	City	State	ZIP Code						
		• •			\$	\$			
	Insider's Name				. Ψ	*			
	Number Street				•				
	City	State	e ZIP Code				the second secon		

Debtor 1	ĺ
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Itai Aaronson

in 1 year before you filed for ban all such matters, including personal contract disputes.	kruptcy, were you injury cases, smal	u a party in any law Il claims actions, dive	suit, court action, or ac orces, collection suits, pa	aternity actions, support	or custody modificati
lo 'es. Fill in the details.					
	Nature of t	the case	Court or agency		Status of the case
40DD00046	Divorce	•	<u> </u>	nty Circuit Court	Pending
Case title 18DR23346			Court Name	ilo Augnijo	On appeal
			100 S. Oakda	lle Avenue	Concluded
			Medford	OR 97501	
Case number			City	State ZIP Code	_
Case title			Court Name		Pending
Case title					On appeal
			Number Street		Concluded
Case number			City	State ZIP Code	_
hin 1 year before you filed for back all that apply and fill in the deta No. Go to line 11.	nkruptcy, was an	y of your property I	epossessed, foreclose	ed, garnished, attached	, seized, or levied?
ck all that apply and fill in the deta	nkruptcy, was an	y of your property (ed, garnished, attached	
ck all that apply and fill in the deta No. Go to line 11.	nkruptcy, was an				
ck all that apply and fill in the deta No. Go to line 11.	nkruptcy, was an	Describe the propert			Value of the proper
ock all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below.	nkruptcy, was an	Describe the propert	y		Value of the proper
ock all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name	nkruptcy, was an	Describe the propert	y ned		Value of the proper
ock all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name	nkruptcy, was an	Explain what happer Property was i	y ned repossessed. Foreclosed.		Value of the proper
ock all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name	ils below.	Explain what happer Property was a	y ned repossessed. foreclosed. garnished.	Date	Value of the proper
ock all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name	ils below.	Explain what happer Property was a	y ned repossessed. foreclosed. garnished. gattached, seized, or levie	Date	Value of the proper
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	ils below.	Explain what happer Property was a P	y ned repossessed. foreclosed. garnished. gattached, seized, or levie	Date	Value of the proper
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	ils below.	Explain what happer Property was a P	y ned repossessed. foreclosed. garnished. gattached, seized, or levie	Date	Value of the proper
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street	ils below.	Explain what happer Property was a P	y ned repossessed. foreclosed. garnished. gattached, seized, or levie	Date	Value of the proper
No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City State	ils below.	Explain what happer Property was a P	y ned repossessed. foreclosed. garnished. attached, seized, or levie	Date	Value of the proper
Creditor's Name Creditor's Name Creditor's Name	ils below.	Explain what happer Property was to Property w	y ned repossessed. foreclosed. garnished. attached, seized, or levie	Date	Value of the proper
Creditor's Name Creditor's Name Creditor's Name	ils below.	Explain what happed Property was to Property w	red repossessed. roreclosed. garnished. attached, seized, or levie	Date	Value of the proper

Case number (if known)___

Itai Aaronson	Case n	umber (if known)
First Name Middle Name Last Na	Ime	
St. 15 to allow	tcy, did any creditor, including a bank or fina	ancial institution, set off any amounts from y
hin 90 days before you filed for bankrup counts or refuse to make a payment beca	icy, did any creditor, including a paint or im-	
	add you owed a contr	
No		
Yes. Fill in the details.		Date action Amount
	Describe the action the creditor took	Date action Amount was taken
Creditor's Name		\$
Number Street		
Number Street		
City State ZIP Code	Last 4 digits of account number: XXXX	
thin 1 year before you filed for bankrupto	cy, was any of your property in the possession	on of an assignee for the benefit of
editors, a court-appointed receiver, a cus	todian, or another official?	
No		
Yes		
5: List Certain Gifts and Contribu	tions	
Lin a warm hafara you filed for hankrun	tcy, did you give any gifts with a total value o	of more than \$600 per person?
	toy, and you give any govern	
No		
Yes. Fill in the details for each gift.		
W #00B	Describe the gifts	Dates you gave Value
Gifts with a total value of more than \$600 per person	Describe me gino	the gifts
Fac Passan		
Person to Whom You Gave the Gift	-	
		\$
	-	
		- Company of the Comp
Number Street		
	. (
City State ZIP Code		
Person's relationship to you	tone	
t craons reignorious to Jon		
Gifts with a total value of more than \$600	Describe the gifts	Dates you gave Value
per person		the gifts
Person to Whom You Gave the Gift		
<u> </u>		<u> </u>
Number Street		
City State ZIP Code	-	
y		
	!	l l

Itai Aaronson	Case number (if known)		
	asi Name		•
in 2 years before you filed for bank	ruptcy, did you give any gifts or contributions with a total value	of more than \$60	0 to any charity?
NO	ontribution.		
res. Fill III the details for each girt s. s		Data way	Value
Gifts or contributions to charities	Describe what you contributed	contributed	Value
that total more than \$555			
			c
	<u> </u>		Ψ
Charity's Name	·		¢
			Ψ
- Charles		The property may	
Manper 2069:			
		L of	
City State ZIP Code			
List Certain Losses			
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your loss	Value of property lost
	claims on line 33 of Schedule A/B: Property.		
			\$
			·
		_i	
List Certain Payments or T	ransfers		
the farman filed for hank	ruptcy, did you or anyone else acting on your behalf pay or tra	nsfer any property	to anyone
lude any attorneys, bankruptcy petitio	n preparers, or credit counseling agencies for services required in y	our bankruptcy.	
165. Fill til tile details.	Description and value of any property transferred	Date payment or	Amount of paymer
	Description and value of any property wants.	transfer was	
Person Who Was Paid		Illade	
		and the second	
		1	\$
Number Street			\$
Number Street			\$
Number Street			\$
			\$ \$
Number Street City State ZIP Co	ie i		\$ \$
City State ZIP Co	de ·		\$ \$
	ie		\$ \$
	in 2 years before you filed for banks No Yes. Fill in the details for each gift or c Gifts or contributions to charities that total more than \$600 Charity's Name Number Street City State ZIP Code List Certain Losses hin 1 year before you filed for banks aster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or T thin 1 year before you filed for banks as consulted about seeking bankrup lude any attorneys, bankruptcy petitio No Yes. Fill in the details.	in 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of ces. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 City State ZiP Code List Cortain Losses Thin 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything aster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers thin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or training to consulted about seeking bankruptcy or preparing a bankruptcy petition? lude any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your yes. Fill in the details. Description and value of any property transferred	in 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$60 No Gifts or contributions to charities that total more than \$500 City State ZIP Codo List Certain Losses Thin 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, if safer, or gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule ARS. Property. List Certain Payments or Transfers thin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property are onsulted about seeking bankruptcy, did you or anyone else acting on your behalf pay or transfer any property are onsulted about seeking bankruptcy or preparing a bankruptcy petition? List Certain Payments or Transfers List Certain Payments or Transfers was made

Itai Aaronson	<u> </u>	Case number (if known)		
Tor 1 First Name Middle Name Last N	ame			
	Description and value of any property tr	ansferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			47.	\$
				Ψ
Number Street		v		\$
City State ZIP Code				
Email or website address	-			
Person Who Made the Payment, if Not You			- man votage	
☑ No ☐ Yes. Fill in the details.	Description and value of any property t	ransferred	Date payment or transfer was	Amount of pay
Person Who Was Paid			made	¢
Number Street	•			Φ
	Windows and the second			\$
City State ZIP Code	-			
8. Within 2 years before you filed for bankrul transferred in the ordinary course of your include both outright transfers and transfers to not include gifts and transfers that you have included in the details.	made as security (such as the granting	of a security interest of	or mortgage on your pr erty or payments receive change	operty).
Person Who Received Transfer				
Number Street	•			
				4
City State ZIP Code				
Person's relationship to you				
Person Who Received Transfer				-
Number Street				Į.
		1		
	1	1		1

Person's relationship to you ____

Nithin 10 years before you filed for bankrupt	cy, did you transfer any propert	y to a self-s	ettled trust o	or similar device of w	nich you
are a beneficiary? (These are often called ass	et-protection devices.)				
☑ No					
☑ Yes. Fill in the details.					
Tes. Fill in the details.					Date transfer
	Description and value of the prope	rty transferred	i		was made
;					
; }					Ì
Name of trust					
					Backson Address
					J
•		to be the second control of the second contr	mana manaka kataman	en and the segment of the second and the second are second as the second and the second are second as the second	
t 8: List Certain Financial Accounts,	Industrial Sefe Denosit	Boxes, an	d Storage	Units	
18: List Certain Financial Accounts,	Instruments, Sale Deposit	30 200,			hanofit
Within 1 year before you filed for bankrupto	y, were any financial accounts o	r instrumen	its held in yo	our name, or for your	benent,
i alasta abaating cavinge money market. (or other financial accounts; cert	ncales of di ancial ineti	spusit, silait Intions	es in painto, or ear are	,
brokerage houses, pension funds, coopera	tives, associations, and other in	lanciai insti	LULIO 1831		
☑ No					
Yes. Fill in the details.				*	
	Last 4 digits of account number	Type of ac		Date account was closed, sold, moved,	Last balance bef closing or transf
		instrument		or transferred	5.55mg 21
Name of Financial Institution	VVVV	Checki	na		\$
	XXXX		_		
Number Street		☐ Saving			
		Money	market		
		Broker	age		
City State ZIP Code		Other_			
Only	·		· · · · · · · · · · · · · · · · · · ·		
		Check	na		\$_
Name of Financial Institution	XXXX		=		
Matte of English transaction		☐ Saving			·
Number Street		Money	market		
Nulliper Chase		☐ Broker	age		
		Other			
City State ZIP Code					
Oity = ·			.e. danaait h	ov or other denosita	v for
Do you now have, or did you have within 1	year before you filed for bankru	ptcy, any sa	ife deposit b	ox or other depositor	y ioi
securities, cash, or other valuables?					
☐ No					
Yes. Fill in the details.	_		D - a suile a Alac	antonte	Do you :
	Who else had access to it?		Describe the	e contents	have it?
			Passport		□ No
Chana			, 2.000016		LZ Yes
Chase Name of Financial Institution	Name				uzz Tes
	raditio				
243 E. Main St.	Number Street				
ипшрег элгеет	Halling) Color	97520			
	City State ZIP Code				
Ashland OR 97520	City State ZIP Code				ĺ
State ZiP Code					

tor 1	Itai Aaronson		Case number (if known)	
LOE I	First Name . Middle Name Łas	t Name		
		or place other than your home Wit	hin 1 year before you filed for bankrupto	<i>i</i> ?
Havey ☑ No		or place office than your manner	•	
_	s. Fill in the details.			Da waw ati
		Who else has or had access to it?	Describe the contents	Do you sti have it?
				□ No
;	Name of Storage Facility	Name		Yes
•	railing of otologo , somy			
Ī	Number Street	Number Street		
		City State ZIP Code		
	City State ZIP Code	•		
1	City State ZIP Code		•	
art 9:	Identify Property You Hold	or Control for Someone Else		
			property you borrowed from, are storing	for,
	old in trust for someone.	2.		
U N				
	es. Fill in the details.		•	
		Where is the property?	Describe the property	Value
	Owner's Name	•		\$
	Olitica a Italiae			i i
		Number Street		
	Number Street	Number Street		
			P Code	
			P Code	
	Number Street City State ZIP Code	. City State Zi	IP Code	
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art 10	Number Street City State ZIP Code City Details About Environ Durnose of Part 10, the following de	City State Zinmental Information		ases of
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art 10 or the Envi haza inclu	City State ZIP Code Give Details About Environ purpose of Part 10, the following de- ronmental law means any federal, stardous or toxic substances, wastes, ading statutes or regulations control means any location, facility, or propi	imental Information finitions apply: ate, or local statute or regulation cor material into the air, land, soil, sling the cleanup of these substancerty as defined under any environn	oncerning pollution, contamination, rele surface water, groundwater, or other med es, wastes, or material.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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or the Envi haza inclu	City State ZIP Code Compose of Part 10, the following developmental law means any federal, standous or toxic substances, wastes, ading statutes or regulations control means any location, facility, or proper it or used to own, operate, or utilizandous material means anything an expression of the code of t	mental Information finitions apply: ate, or local statute or regulation cormaterial into the air, land, soil, soil, ing the cleanup of these substance erty as defined under any environment, including disposal sites.	oncerning pollution, contamination, rele surface water, groundwater, or other med es, wastes, or material.	te, or
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Part 10 For the Barrier Environment of the Barri	City State ZIP Code City State ZIP Code Purpose of Part 10, the following delease or toxic substances, wastes, adding statutes or regulations control means any location, facility, or propose it or used to own, operate, or utilizardous material means anything an estance, hazardous material, pollutantal notices, releases, and proceeding any governmental unit notified you to	imental Information finitions apply: ate, or local statute or regulation cor material into the air, land, soil, sling the cleanup of these substance it, including disposal sites. environmental law defines as a hazt, contaminant, or similar term.	concerning pollution, contamination, relectorface water, groundwater, or other medes, wastes, or material. Inental law, whether you now own, operated ardous waste, hazardous substance, tox	te, or
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First Name Middle Name Last N	ame		
ve you notified any governmental unit of	any release of hazardous ma	aterial?	
	any 1010000 or 110000 areas		
No			
Yes. Fill in the details.	Governmental unit	Environmental law, if you know it	Date of notice
	GOVERNMENTAL COME		
			į
Name of site	Governmental unit		.
	Number Street		
Number Street	Maniper anor		
	City State ZIP Coo	de	
	~,		
City State ZIP Code			
been a norty in any judicial or adr	ministrative proceeding unde	er any environmental law? Include settlem	ents and orders.
		•	
No			
Yes. Fill in the details.	Court or occupy	Nature of the case	Status of the case
	Court or agency		case
Case title			Pending
	Court Name		On appe
	- Oberet		☐ Conclud
·	Number Street	, , , , , , , , , , , , , , , , , , ,	
		VD Code	
Case number	City State 2	ZIP Code	
	City	•	, , , , , , , , , , , , , , , , , , ,
14: Give Details About Your Bus	siness or Connections to	Any Business	
11: Give Details About Your Bus	siness or Connections to	Any Business or have any of the following connections	to any business?
11: Give Details About Your Bus ithin 4 years before you filed for bankrup A sole proprietor or self-employed	siness or Connections to otcy, did you own a business in a trade, profession, or oth	Any Business or have any of the following connections er activity, either full-time or part-time	to any business?
14: Give Details About Your Bus	siness or Connections to otcy, did you own a business in a trade, profession, or oth	Any Business or have any of the following connections er activity, either full-time or part-time	to any business?
Give Details About Your Bustithin 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability comparts of the partner of a partnership	siness or Connections to otcy, did you own a business in a trade, profession, or oth pany (LLC) or limited liability	Any Business or have any of the following connections er activity, either full-time or part-time	to any business?
Ithin 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability comp A partner in a partnership An officer, director, or managing ex	siness or Connections to otcy, did you own a business in a trade, profession, or oth pany (LLC) or limited liability secutive of a corporation	Any Business or have any of the following connections er activity, either full-time or part-time partnership (LLP)	to any business?
Give Details About Your Bustithin 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability comparts of the partner of a partnership	siness or Connections to otcy, did you own a business in a trade, profession, or oth pany (LLC) or limited liability secutive of a corporation	Any Business or have any of the following connections er activity, either full-time or part-time partnership (LLP)	to any business?
Ithin 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votir	siness or Connections to otcy, did you own a business in a trade, profession, or oth pany (LLC) or limited liability recutive of a corporation ag or equity securities of a co	Any Business or have any of the following connections er activity, either full-time or part-time partnership (LLP)	to any business?
Ithin 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability comp A partner in a partnership An officer, director, or managing ex An owner of at least 5% of the votir	siness or Connections to otcy, did you own a business in a trade, profession, or oth pany (LLC) or limited liability secutive of a corporation ag or equity securities of a co-	Any Business or have any of the following connections aer activity, either full-time or part-time or partnership (LLP) orporation h business.	
It: Give Details About Your Bustithin 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability compartment of a partnership An officer, director, or managing expands An owner of at least 5% of the voting No. None of the above applies. Go to Pares. Check all that apply above and fill	siness or Connections to otcy, did you own a business in a trade, profession, or oth pany (LLC) or limited liability secutive of a corporation ag or equity securities of a co-	Any Business or have any of the following connections are activity, either full-time or part-time or partnership (LLP) orporation h business. Employer identifications	ation number
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Give Details About Your Bustithin 4 years before you filed for bankrup A sole proprietor or self-employed A member of a limited liability comp A partner in a partnership An officer, director, or managing expanding An owner of at least 5% of the voting No. None of the above applies. Go to Partnership Yes. Check all that apply above and fill Aaronson Woodworking	siness or Connections to otcy, did you own a business in a trade, profession, or oth pany (LLC) or limited liability executive of a corporation ag or equity securities of a corporation eart 12. I in the details below for each	Any Business for have any of the following connections are activity, either full-time or part-time or partnership (LLP) proporation h business Employer Identification not include Society EIN: 5 5 -0	ation number cial Security number or ITIN. 8 7 2 7 4 4
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	Itai Aaronson First Name Middle Name Last	Name C	ase number (if known)
		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN
	Business Name		EIN:
	Number Street	Name of accountant or bookkeeper	Dates business existed
	City State ZIP Code		From To
	City State ZIP Code		
	n 2 years before you filed for bankrup utions, creditors, or other parties.	otcy, did you give a financial statement to	anyone about your business? Include all financial
N	0		
Υ	es. Fill in the details below.		
		Date issued	
	Name	MM / DD / YYYY	
	Number Street		
	City State ZIP Code		
12	: Sign Below		
ha ns	ve read the answers on this Statemen	nt of Financial Affairs and any attachment nd that making a false statement, conceal n result in fines up to \$250,000, or impriso	s, and I declare under penalty of perjury that the ing property, or obtaining money or property by frau onment for up to 20 years, or both.
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namens of the control	ve read the answers on this Statement wers are true and correct. I understant onnection with a bankruptcy case card I.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1	and that making a false statement, concealing result in fines up to \$250,000, or imprisonable Signature of Debtor 2	ing property, or obtaining money or property by frau onment for up to 20 years, or both.
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has not sell at a lid	ve read the answers on this Statement wers are true and correct. I understant onnection with a bankruptcy case card. S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date 652019 you attach additional pages to Your Signature of Statement and Statement Stat	and that making a false statement, concealing result in fines up to \$250,000, or imprison Signature of Debtor 2 Date Statement of Financial Affairs for Individuation of the imprison of the impriso	ing property, or obtaining money or property by frau onment for up to 20 years, or both. als Filing for Bankruptcy (Official Form 107)?

Bank of America 100 North Tryon Street Charlotte, NC 28255

American Express World Financial Center New York, NY 10285 19/62384

	CEERK, US BANKEUPTOY COURT DISTRICT OF OREOGE
Fill in this information to identify your case:	2019 AUG -5 PM 4: 20
Debtor 1 Itai Aaronson First Name Milddle Name Last Name	
Debtor 2 (Spouse, if filling) First Name Middle Name Last Name	PAID COCKETED PAID
United States Bankruptcy Court for the: District of Oregon Case number (if known)	Check if this is an amended filing

Official Form 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an *insider*. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

2	ırt	1	

List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

					Unsecured	claim
			What is the nature of the claim? Credi	t cards	\$	40,00
Bank of America			As of the date you file, the claim is: Chec			
reditor's Name			☐ Contingent	1,, ,		
100 North Tryon	St.		☐ Unliquidated			
umber Street			☐ Disputed			
			None of the above apply			
Charlotte	NC	28255	- '- '- '- '- '- '- '- '- '- '- '- '- '-			
ity	State	ZIP Code	Does the creditor have a lien on your pro	pperty?		
Contact			Yes. Total claim (secured and unsecured):	\$		
omaci			Value of security:	- \$		
Contact phone	·		Unsecured claim	\$		
neg a com tra a regionage como a comita e est a call a coltiga et estatoriale en	grand grange vice and angles of a confidence of the	the section of the se	What is the nature of the claim? Cred	it Cards		20,00
			What is the nature of the side		\$,-
American Expre	SS		As of the date you file, the claim is: Chec	k all that apply.		
Creditor's Name World Finincial (Contor		Contingent			
VVONG FINITCIAL Vumber Street	Jenter		☐ Unliquidated			•
Ander Saser			Disputed			
			None of the above apply			
New York	NY	10285				
	State	ZIP Code	Does the creditor have a lien on your pr	operty?		
City			□ No			
City						
			 Yes. Total claim (secured and unsecured): 	\$		
Contact			 Yes. Total claim (secured and unsecured): Value of security: 	\$ - \$		

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Itai Aard	onson		
First Name	Middle Name	Last Name	

Case number (if known)	
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Unsecured claim

The state of the s			What is the nature of the claim?	<u> </u>
Creditor's Name			As of the date you file, the claim is: Check all that ap	pply.
Number Street			☐ Contingent	
(quilbo)			☐ Unliquidated	
			☐ Disputed	
			■ None of the above apply	
Cily	State Zil	P Code	Does the creditor have a lien on your property?	
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			Yes. Total claim (secured and unsecured): \$	
Contact			Value of security: - \$	
			Unsecured claim \$	
Contact phone			Onbodied value	
			What is the nature of the claim?	<u> </u>
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Oledifor a Legino				• •
Number Street			☐ Contingent ☐ Unliquidated	
(Idinovi				
			Disputed	
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Millibal Ottest			Unliquidated	
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			Yes. Total claim (secured and unsecured): \$	
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			Unsecured claim \$	
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6			What is the nature of the claim?	<u> </u>
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Creditor's Name			As of the date you file, the claim is: Check all that	аррly.
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Sity.			☐ No	
			Yes. Total claim (secured and unsecured): \$	
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			Unsecured claim \$	
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and the second s	o as	о тэ-		20 Largest Unsecured Claims page

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Contact phone

	Itai Aaron			Case		
	First Name	Middle Name	Last Name	3	and the second s	Unsecured claim
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editor's N	lame			As of the date you file, the claim is: Check a	Il that apply.	
				Contingent	(//20	
mber	Street			☐ Unliquidated		
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		State	ZIP Code	Does the creditor have a lien on your prope	erty?	
ty		Otato	2 5555	□ No		
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ontact				Value of security:	\$	
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ontact pho	one	Anna Anna	and the first section of the section	merke stoods to the superior of states around Apode memory states and the contribution of the contribution of the superior of		¢.
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onlact				Value of security:	\$	
ontacl ph	NO.00			Unsecured claim	\$	men maktin pan salah salah menalak paparanan salah kalan maka men
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lumber	Street			☐ Unliquidated		
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City		State	ZIP Code	Does the creditor have a lien on your prop	perty?	
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	s Name			Contingent		
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Itai Aar	onson		
First Name	Middle Name	Last Name	

Case number	(if known)	 	 	

Unsecured claim

On the January		What is the nature of the claim?		Ψ
Creditor's Name		As of the date you file, the claim is:	Check all that apply.	
Number Street		Contingent		
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City	State	Code Does the creditor have a lien on you	r property?	
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Colliace		Value of security:	- \$	
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Oonaac phono				_
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		Does the creditor have a lien on you	ir property?	
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de miner est de entigate de la tradeció de la companya de la companya de la companya de la companya de la comp An eminer est de la companya de la c	en Mercelousian in tenseonal representations			\$
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		Unsecured claim	\$	
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Debtor 1

Itai Aa	ronson		
First Name	Middle Name	Last Name	

Case number (if known)	
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				Unsecured claim
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Number Street	Stale ZIP Code	☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured): Value of security: —		
Number Street City Contact	State ZIP Code	☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured): Value of security: —		
Number Street City Contact	State ZIP Code	☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured): Value of security: —		
Number Street City	State ZIP Code	☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured): Value of security: —		
Number Street City Contact	Stale ZIP Code	☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured): Value of security: —		
Number Street City Contact Contact phone	State ZIP Code	☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured): Value of security: —		
Number Street City Contact	State ZIP Code	☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured): Value of security: —		
Number Street City Contact Contact phone	Slate ZIP Code	☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured): Value of security: —		
Number Street City Contact Contact phone		☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured): Value of security: Unsecured claim	\$\$ \$	
Number Street City Contact Contact phone		☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured): Value of security: —	\$\$ \$	
Number Street City Contact Contact phone		☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured): Value of security: Unsecured claim	\$\$ \$	
Number Street City Contact Contact phone		☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured):	\$\$ \$	
City Contact Contact phone 1t 2: Sign Below Inder penalty of perju		□ Disputed □ None of the above apply Does the creditor have a lien on your propulation of the creditor have a lien of the creditor h	\$\$ \$	
City Contact Contact phone 1t 2: Sign Below Inder penalty of perju		☐ Disputed ☐ None of the above apply Does the creditor have a lien on your prop ☐ No ☐ Yes. Total claim (secured and unsecured):	\$\$ \$	
Number Street City Contact Contact phone		□ Disputed □ None of the above apply Does the creditor have a lien on your propulation of the creditor have a lien of the creditor h	\$\$ \$	